

House Calendar No. 1

| | | |
|--|--------------------------|-------------------|
| 105TH CONGRESS } <i>1st Session</i> | HOUSE OF REPRESENTATIVES | { REPORT 105-1 |
|--|--------------------------|-------------------|

IN THE MATTER OF REPRESENTATIVE NEWT GINGRICH--
pages 301 to 400

August 15, 1990

Mr. Jim Richards
Southwire Company
P.O. Box 1000
Carrollton, Georgia 30119

Dear Jim:

I very much enjoyed visiting with you yesterday and I appreciate your taking time out of your busy schedule to meet with me and June.

You had asked how we could measure the success of this project and I have listed several significant measures below:

1. The number of workshop sites across the country and the number of participants who attend. I have enclosed one of our national workshop site directories for your review.
2. The amount of media generated by each show. There were favorable reports in several major publications regarding the May 19th show including USA Today, The Washington Post and The Wall Street Journal.
3. The prestige of the individuals who participate and endorse American Citizens' Television including Pete du Pont, Detroit City Councilman Keith Butler, Congressmen Duncan Hunter, Andy Ireland, Fred Grandy and others. Governor of Maine Jock McKernan, President Bush and Vice President Quayle all participated in the May 19th show.
4. The number of allies who support us such as the Heritage Foundation, Free Congress, Citizens for a Sound Economy, the National Chamber of Commerce, National Vietnam Veterans Coalition, The Family Channel and Citizens Against Government Waste.
5. This is the ultimate and most effective use of technology to build a grass roots movement and in many ways will not be measureable except by watching the next two elections.

Exhibit 25

GOPAC3 0512

Jim, as is the case with the start-up phase of many operations, ACTV is in urgent need of special funding help to get it through its infancy. There is an immediate need for \$100,000 to \$200,000 to complete our fall programming and allow us to plan for next year.

I, of course, want to wish you the best of luck with your sales job. We're obviously very hopeful and are keeping our fingers crossed.

Again, thank you for meeting with us. Newt and Bo are deeply committed to this project and would be extremely pleased to have your support as well. I look forward to hearing from you soon.

Sincerely,

Jeff Eisenach

Exhibit 25

GOPAC

THE NATIONAL
GRASS-ROOTS
ORGANIZATION
BUILDING
REPUBLICAN
LEADERS FOR
AMERICA'S
FUTURE

440 FIRST STREET
NORTHWEST
SUITE 400
WASHINGTON, D.C.
20001
PHONE (202) 484-2282
FAX (202) 783-3306

GOPAC3 0513

CONVOKARY CHAIRMAN
NEWT GINGRICH
GENERAL CHAIRMAN
HOWARD H. CALLAWAY
CHAIRMAN

August 24, 1990

Mr. Jim Richards
Southwire Company
P.O. Box 1000
Carrollton, Georgia 30119

Dear Jim,

I enjoyed talking with you and appreciate your continued interest in everything that Newt and I are doing.

I understand your frustration. It can be difficult to measure the results of something like ACTV, but I think there are some objective criteria that we can use.

Since May 19th there have been nearly 1,000 ACTV workshops held across the country. Many activists are working on their third workshop for September 29th.

In addition to the workshops, we have more than 100 activists working to become ACTV affiliate producers. These people are enrolling in local cable classes now so that they can produce local programs in the fall.

Perhaps the greatest indicator of success is the talk of other national conservative groups on how they can copy what ACTV is doing. Clearly, what we are doing has captured the imagination of the grassroots political movement.

I appreciate that your talking to Roy and deciding what you will want to do. I hope it will not come to a choice between GOPAC and A.C.T.V. I strongly urge you to continue your strong support for GOPAC. That is the fundamental thing that we will need to do to control the U.S. Congress in 1992.

If you feel that you are in a position to do more, and especially if you would like to do it in a tax deductible way, I think A.C.T.V. is a good opportunity.

Please call me if at any time I can answer any questions or can be of help in any way.

Sincerely,



Exhibit 25

ABRAHAM LINCOLN OPPORTUNITY FOUNDATION

Howard H. Callaway
Chairman
Stacey A. Oswalt
Director of Development

August 16, 1990

Mr. Jim Richards
Southwire Company
P.O. Box 1000
Carrollton, Georgia 30119

Dear Jim:

I very much enjoyed visiting with you Tuesday and I appreciate your taking time out of your busy schedule to meet with June and me. Of course, we are deeply grateful for your willingness to consider near term funding for ACTV.

I also wanted to respond to two specific topics that you raised.

First, your suggestion about the need to identify quantitative measures of success is well taken and I have given it some thought. Below I have gone over some of the measures of success we have used in the past.

We had a number of workshop sites across the country and several thousand participants who attended those workshops. I have enclosed one of our national workshop site directories for your review.

The media generated by each show is a great indicator. There were favorable reports in several major publications regarding the May 19th show including USA Today, The New York Times, The Washington Post and The Wall Street Journal.

We had the support of prestigious people across America including Pete du Pont, Detroit City Councilman Keith Butler, Congressmen Duncan Hunter, Andy Ireland, Fred Grandy and others. Governor of Maine Jock McKernan, President Bush and Vice President Quayle all participated in the May 19th show.

We have strong allies who support us such as the Heritage Foundation, Free Congress, Citizens for a Sound Economy, the National Chamber of Commerce, National Vietnam Veterans Coalition, The Family Channel and Citizens Against Government Waste.

Exhibit 25

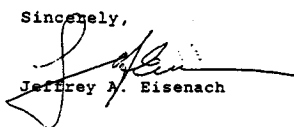
GOPAC3 0515

As we move forward we will continue to rely on these measures of success and will work to develop new ones. I would very much appreciate any of your thoughts on which specific measures would be most useful.

Secondly, we're very interested in your suggestion about using your production facilities and I'll be discussing this with our producer as we begin planning for next year. I'll let you know what we've determined as soon as possible.

Again, thank you for meeting with us. Newt and Bo are deeply committed to this project and would be extremely pleased to have your support as well. I look forward to hearing from you soon.

Sincerely,



Jeffrey A. Eisenach

JA/so

Exhibit 25

EXHIBIT 26

WASHINGTON POLICY GROUP, INC.

Eisenach
4250**ROUTING SLIP**DATE: 8/16/90**TRANSMIT BY:****FAX**

HAND

FEDEX

MAIL

FROM: JEFF EISENACH

| | | | |
|-------------------|-------------------------------------|----------------|--------------------------|
| TO: MARY BROWN | <input type="checkbox"/> | LINDA NAVE | <input type="checkbox"/> |
| BO CALLAWAY | <input type="checkbox"/> | TOM MORGAN | <input type="checkbox"/> |
| BILL DYKE | <input type="checkbox"/> | KAY RIDDLE | <input type="checkbox"/> |
| JOE GAYLORD | <input type="checkbox"/> | FRED STEEPER | <input type="checkbox"/> |
| MARIANNE GINGRICH | <input type="checkbox"/> | DAN SWILLINGER | <input type="checkbox"/> |
| NEWT GINGRICH | <input type="checkbox"/> | LEN SWINEHART | <input type="checkbox"/> |
| STEVE HANSER | <input type="checkbox"/> | PAUL WEYRICH | <input type="checkbox"/> |
| EDDIE MAHE | <input checked="" type="checkbox"/> | OTHERS | <u>Jim Bolton</u> |
| DAN MEYER | <input type="checkbox"/> | | |

COMMENTS

Exhibit 26

AUG-14-90 TUE 9:35 3038940516

P. 02

GOPAC

THE NATIONAL
GRASS-ROOTS
ORGANIZATION
BUILDING
REPUBLICAN
LEADERS FOR
AMERICA'S
FUTURE440 FIRST STREET
NORTHWEST
SUITE 400
WASHINGTON, D.C.
20001
PHONE (202) 484-2282
FAX (202) 783-3906GERALD R. FORD
HONORARY CHAIRMAN
NEWT GINGRICH
GENERAL CHAIRMAN
HOWARD H. CALLAWAY
CHAIRMANEisenach
4251

MEMORANDUM

TO: Newt Gingrich

FROM: Bo Callaway *B.*

DATE: August 13, 1990

SUBJECT: Tentative decisions made at the North Pole
Basin planning meetings.

I would have liked to have talked to you in person about our North Pole Basin meetings before sending this memo, but since you are going to be planning for 1992 this week, I think it is essential for me to get this information to you as quickly as possible. I would appreciate it if you would go over the material in this memo before you get involved in your 1992 planning session in Georgia.

The first part of the discussion was mechanical. It was agreed that there are three broad things that GOPAC does:

1. Traditional GOPAC.
2. Newt support.
3. Projects such as ACTV, AOW and focus groups.

It was unanimously felt that the regular funding for GOPAC, to include Charter and direct mail, should be spent for Traditional GOPAC and Newt support, and that all projects in the future should meet the test of the marketplace. That is, if they are not funded up front, we don't do them. The feeling was that this would take away from the concerns that many people have had about GOPAC sending mixed messages. Charter members would know what their money is being given for; those who give to projects would know what their money is being given for.

As an aside, it was also felt that no individual should be allowed to give to projects unless the first \$10,000 of that gift went as a Charter membership. For example, if a person was interested in a project of GOPAC and wanted to give \$100,000 to it, the first \$10,000 would be Charter and the next \$90,000 would go to the project. This would not apply to corporations or foundations, although for corporations we would encourage the first \$10,000 to be given as a Charter membership.

Exhibit 26

AUG-14-90 TUE 9:36 3030940516

P. 02

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2

Everyone felt that 1992 was the best chance that we will have in our lifetime to make the kind of bold changes that we all saw as necessary. Here is our plan for 1992, either done by GOPAC or by others, with GOPAC's encouragement:

1. 100-Day Agenda

It was strongly felt that we had to develop an agenda worth voting for. I think Dan Meyer is working on this now through ranking Members. We also know that Heritage, Cato, and others have pretty well developed things along this line. Our thought was for COS or GOPAC or someone to sponsor a meeting in Washington with all of the players such as Hudson, Cato, AEI, Heritage, Hoover Institute, as well as political consultants and Members of Congress who share our vision to discuss, in a conference for a day or two, what the 100-Day Agenda should be. Then the sponsor, with a few research and writing assistants would put together a document that, hopefully, would be approved by the vast majority of the participants as the agenda that candidates could support for the first 100 days in 1993 (because of 501(c)(3) participation, we might have to make it less Republican). We would give it a name (for now "100-Day Agenda") and would ask all candidates running in 1992 to sign off for supporting all or essentially all of the program. The conference should be held in Washington, no later than January 1991.

2. Recruiting Quality Candidates.

GOPAC (or some other entity) would make a real run at recruiting quality candidates. We would start by contacting our 6,000 on the farm team as well as any others that the RNC or NRCC might have. We would ask them to sign up to support the 100-Day Agenda and to consider running for Congress. We would use Tom Morgan, Mark Colucci and others to develop a number of candidates that would seem good. We would also try our best at determining who the ideal person or persons would be in each of our targeted 200 Congressional districts.

When we had a list of those we would like to recruit, we would send distinguished people such as Congressmen, former Congressmen, Governors, etc., to do the recruiting. We would have demographic and opposition research (hopefully done by the NRCC) to use as persuasion for those being recruited. We would have funds available to pay for travel expenses for those who do the recruiting. The idea would be to see that no later than June 1991 we had at least one good candidate committed to run and also committed to the 100-Day Agenda in every one of our 200 targeted districts.

Exhibit 26

AUG-14-90 TUE 9:37 3038940516

P. 04

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3

3. National Media Campaign

GOPAC would be the catalyst to set up a non-GOPAC independent expenditure group prepared to conduct a national media campaign for the three or four most significant items of the 100-Day Agenda and to publicize a list of candidates who are supporters of the 100-Day Agenda.

The idea is to be prepared with an independent expenditure group ready to go immediately after the Republican Convention and hopefully raise the \$30,000,000 it would cost to set the stage for a national campaign which spelled out the importance of making a change and the importance of voting for those who support the 100-Day Agenda.

All of this, as a 1992 project, would have to stand the test of the marketplace and be funded as a project before GOPAC would spend money on it.

The idea was that Eddie Mahe would do some planning together with input from all of us at the North Pole. I think Terry Kohler would fund the small amount of planning money required. Then we would have a meeting, probably on November 13, the day after the Charter meeting, of those Charter members who might be interested in putting this together. At that time Eddie Mahe would have a plan for us which we could then approve in more detail to include costs and time lines.

HHC:lk

Exhibit 26

CNB 0006

5198

ABRAHAM LINCOLN OPPORTUNITY
FOUNDATION
1275 TREMONT PL
DENVER CO 80204

2

PRIMARY ACCOUNT
060-909
PREVIOUS STATEMENT
05-31-90
CURRENT STATEMENT
06-30-90

IF YOU NEED ASSISTANCE OR HAVE ANY QUESTIONS, PLEASE CONTACT YOUR BETTER BANKER, CONVENIENCE BANKING.

**BETTER
BANKING
NEWS**

| YOUR FINANCIAL SUMMARY | ACCOUNT TYPE | NUMBER | BALANCE |
|------------------------------|-------------------|---------|-----------|
| | INTEREST CHECKING | 060-909 | 24,377.68 |

| | (1) | (2) | TAXPAYER ID NUMBER | YEAR |
|---------------|-----|-----|--------------------|------|
| INTEREST | 00 | 00 | 98-00 | 1976 |
| DIVIDENDS | 00 | 00 | 98-00 | 1977 |
| CAPITAL GAINS | 00 | 00 | 98-00 | 1978 |
| LOSSES | 00 | 00 | 98-00 | 1979 |
| SUMMARY | 25 | 00 | 98-00 | 1980 |

| CHECKS PAID IN SEQUENCE | | | |
|-------------------------|--------|-------|-------|
| CHECK | AMOUNT | DATE | CHECK |
| 1129 | 944.94 | 04-22 | |

TRANSMISSION REFLECTS 060-908

| DATE | TRANSACTION |
|-------|----------------------------|
| 05-31 | BEGINNING BALANCE |
| 06-20 | NO FLOW CREDIT |
| 06-22 | CHECK 1129 |
| 06-30 | INTEREST PAYMENT GENERATED |
| | ENDING BALANCE |

| AMOUNT | BALANCE |
|----------|-----------|
| 5,000.00 | 486.08 |
| 944.54 | 25,486.08 |
| 36.54 | 24,541.14 |
| | 24,577.68 |

CPSC 000000028448461
CPSC 000000016740998
1-CF0000030000000057

Exhibit 27

EXHIBIT 28

ALOF
0043

OMB No. 1545-1150

Short Form
Return of Organization Exempt From Income Tax

Form **990EZ** Under section 501(c) of the Internal Revenue Code (except black lung benefit trust or private foundation) or section 4947(a)(1) charitable trust

Department of the Treasury Internal Revenue Service **1990**

For the calendar year 1990, or fiscal year beginning 1990, and ending 19

Name of organization: **Abraham Lincoln Opportunity Foundation, Inc.** A Employer identification number (see instruction R2): **74 2358885**

Number, street, and room (if P.O. box number, see instruction R1): **440 First Street, NW, #400** B State registration number(s) (see instruction E):

City or town, state, and ZIP code: **Washington, DC 20001** C If application for exemption is pending, check here:

D Check type of organization: ☒ 501(c) 3 (insert number), OR ☐ section 4947(a)(1) trust (see instruction C7 and question 42)

E Accounting method: ☒ Cash ☐ Accrual ☐ Other (specify):

F Check here ☐ if your gross receipts are normally not more than \$25,000. You need not file a completed return with IRS; but if you received a Form 990 Package in the mail, you should file a return without financial data (see instructions A4 and B11). Some states require a completed return.

G Enter your 1990 gross receipts (add lines 5b, 6b, 7b, and 9): \$

If \$100,000 or more, you must file Form 990 instead of Form 990EZ.

Part I Statement of Revenue, Expenses, and Changes in Net Assets or Fund Balances

| | | | | |
|------------|---|--|----------|----------|
| Revenue | 1 | Contributions, gifts, grants, and similar amounts received (attach schedule—see instructions) | 1 | 97,750 |
| | 2 | Program service revenue | 2 | |
| | 3 | Membership dues and assessments (see instructions) | 3 | |
| | 4 | Investment income | 4 | 384 |
| | 5a | Gross amount from sale of assets other than inventory | 5a | |
| | 5b | Less: cost or other basis and sales expenses | 5b | |
| | 5c | Gain or (loss) (line 5a less line 5b) (attach schedule) | 5c | |
| | 6 | Special events and activities (attach schedule—see instructions): | 6 | |
| | 6a | Gross revenue (not including \$ of contributions reported on line 1) | 6a | |
| | 6b | Less: direct expenses | 6b | |
| 6c | Net income or (loss) (line 6a less line 6b) | 6c | | |
| 7a | Gross sales less returns and allowances | 7a | 160 | |
| 7b | Less: cost of goods sold | 7b | | |
| 7c | Gross profit or (loss) (line 7a less line 7b) | 7c | 160 | |
| 8 | Other revenue (describe) | 8 | | |
| 9 | Total revenue (add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8) | 9 | 98,294 | |
| Expenses | 10 | Grants and similar amounts paid (attach schedule) | 10 | |
| | 11 | Benefits paid to or for members | 11 | |
| | 12 | Salaries, other compensation, and employee benefits | 12 | 18,000 |
| | 13 | Professional fees and other payments to independent contractors | 13 | 5,018 |
| | 14 | Occupancy, rent, utilities, and maintenance | 14 | |
| | 15 | Printing, publications, postage, and shipping | 15 | 14,593 |
| | 16 | Other expenses (describe) Schedule II | 16 | 105,461 |
| | 17 | Total expenses (add lines 10 through 16) | 17 | 143,072 |
| Net Assets | 18 | Excess or (deficit) for the year (line 9 less line 17) | 18 | (44,778) |
| | 19 | Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) | 19 | 1,199 |
| | 20 | Other changes in net assets or fund balances (attach explanation) | 20 | |
| | 21 | Net assets or fund balances at end of year (combine lines 18 through 20) (must agree with line 27, column (B)) | 21 | (43,579) |
| | 22 | Cash, savings, and investments | 22 | 2,399 |
| 23 | Land and buildings | 23 | | |
| 24 | Other assets (describe) | 24 | | |
| 25 | Total assets | 25 | 2,399 | |
| 26 | Total liabilities (describe) Schedule III | 26 | 45,978 | |
| 27 | Net assets or fund balances (Column (B) must agree with line 21.) | 27 | (43,579) | |

Part II Balance Sheets—If total assets on line 25, Column (B) are \$250,000 or more, you must file Form 990 instead of Form 990EZ.

| | (A) Beginning of year | (B) End of year |
|--|-----------------------|-----------------|
| 22 Cash, savings, and investments | 1,199 | 2,399 |
| 23 Land and buildings | | |
| 24 Other assets (describe) | | |
| 25 Total assets | 1,199 | 2,399 |
| 26 Total liabilities (describe) | 0 | 45,978 |
| 27 Net assets or fund balances (Column (B) must agree with line 21.) | 1,199 | (43,579) |

For Paperwork Reduction Act Notice, see page 1 of the separate instructions.

Form **990EZ** (1990)

Exhibit 28

1-16-90

ALOF
0044

2758

| | | | | |
|---|--|---|--|---------------------------------------|
| Form 2758 (Rev. November 1989) Department of the Treasury Internal Revenue Service | | Application for Extension of Time To File Certain Excise, Income, Information, and Other Returns ▶ File a separate application for each return. | | OMB No. 1545-0148 Expires 10-31-92 |
| Name Abraham Lincoln Opportunity Foundation, Inc. | | Employer identification number 74-2358885 | | |
| Please type or print. Number and street (or P.O. Box number if mail is not delivered to street address) 1275 Tremont Place | | | | |
| City or town, state, and ZIP code Denver, CO 80204 | | | | |

Note: Taxpayers who file a corporation income tax return, including Forms 990-C, 990-T, and 1120S, must use Form 7004 to request an extension of time to file.
 Partnerships, REMICs, and trusts (except those that file Form 990-T) must use Form 8736 to request an extension of time to file.

- 1 An extension of time until November 15, 1991 is requested in which to file (check only one):
- | | | | | |
|---|--|--|--------------------------------------|------------------------------------|
| <input type="checkbox"/> Form 706GS (D) | <input type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 3520-A | <input type="checkbox"/> Form 8612 |
| <input type="checkbox"/> Form 706GS (T) | <input type="checkbox"/> Form 990-T (401(a) or 408(a) trust) | <input type="checkbox"/> Form 1042 | <input type="checkbox"/> Form 4720 | <input type="checkbox"/> Form 8613 |
| <input checked="" type="checkbox"/> Form 990 or 990EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 1042S | <input type="checkbox"/> Form 5227 | <input type="checkbox"/> Form 8725 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 1041 (estate) | <input type="checkbox"/> Form 1120-ND (4951 taxes) | <input type="checkbox"/> Form 6069 | <input type="checkbox"/> Form 8804 |

- If organization does not have an office or place of business in the United States, check this box ☐
- 2a For calendar year 19 90, or other tax year beginning November 15, 1991 and ending November 15, 1991
- b If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period
- 3 Has an extension of time to file been previously granted for this tax year? ☒ Yes ☐ No
- 4 State in detail why you need the extension. Additional time is required in order to file a complete and accurate tax return for the year.
- 5a If this form is for Form 706GS(D), 706GS(T), 990-BL, 990-PF, 990-T, 1041 (estate), 1042, 1120-ND, 4720, 6069, 8612, 8613, 8725, or 8804 enter the tentative tax. (see instructions) \$ 6069.8612.8613.8725. or 8804
- b If this form is for Form 990-PF, 990-T, 1041 (estate), 1042, or 8804 enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. (see instructions) \$ 0
- c Balance due (subtract line 5b from line 5a). Include your payment with this form, or deposit with FTD coupon if required. (see instructions) \$ 0

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete; and that I am authorized to prepare this form.

Signature ▶

Date ▶

File original and one copy. IRS will show below whether or not your application is approved and will return the copy.

Notice to Applicant—To Be Completed by IRS

- ☒ We HAVE approved your application. (Please attach this form to your return.)
- ☐ We HAVE NOT approved your application. (Please attach this form to your return.) However, because of your reasons stated above, we have granted a 10-day grace period from the date shown below or due date of your return, whichever is later. This 10-day grace period is considered to be a valid extension of time for purposes of elections otherwise required to be made on timely filed returns.
- ☐ We HAVE NOT approved your application. After considering your reasons stated above, we cannot grant your request for an extension of time to file. (We are not granting the 10-day grace period.)
- ☐ We cannot consider your application because it was filed after the due date of your return.
- ☐ Other _____

Date

By

If the copy of this form is to be returned to an address other than that shown above, please enter the address where the copy should be sent:

| | | |
|--|--|-------------------|
| Name Gilbert & Wolfand, P.C. | | Exhibit 28 |
| Number and street (or P.O. Box number if mail is not delivered to street address) 2201 Wisconsin Avenue, NW, Suite 320 | | |
| City or town, state, and ZIP code Washington, DC 20007 | | |

For Paperwork Reduction Act Notice, see back of form.

Form 2758 (Rev. 11-89)

1-16-90

ALOP
0045

2758

Form **2758**(Rev. November 1989)
Department of the Treasury
Internal Revenue Service**Application for Extension of Time To File
Certain Excise, Income, Information, and Other Returns**

File a separate application for each return.

OMB No. 1545-0148
Expires 10-31-92

| | | |
|---|--|--|
| Name | Abraham Lincoln Opportunity Foundation, Inc. | |
| Please type or print. | 1275 Tremont Place | |
| Number and street (or P.O. Box number if mail is not delivered to street address) | Denver, CO 80204 | |
| City or town, state, and ZIP code | Employer identification number 74-2358885 | |

Note: Taxpayers who file a corporation income tax return, including Forms 990-C, 990-T, and 1120S, must use Form 7004 to request an extension of time to file.

Partnerships, REMICs, and trusts (except those that file Form 990-T) must use Form 8736 to request an extension of time to file.

1. An extension of time until November 15, 1991 is requested in which to file (check only one):

| | | | |
|--|--|--|------------------------------------|
| <input type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 3520A | <input type="checkbox"/> Form 8612 |
| <input type="checkbox"/> Form 706GS (D) | <input type="checkbox"/> Form 990-T (401(a) or 408(a) trust) | <input type="checkbox"/> Form 1042 | <input type="checkbox"/> Form 4720 |
| <input type="checkbox"/> Form 706GS (T) | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 1042S | <input type="checkbox"/> Form 5227 |
| <input type="checkbox"/> Form 990 or 990EZ | <input type="checkbox"/> Form 1041 (estate) | <input type="checkbox"/> Form 1120-ND (4951 taxes) | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-BL | | | <input type="checkbox"/> Form 8804 |

If organization does not have an office or place of business in the United States, check this box ☐

2a. For calendar year 19 90, or other tax year beginning November 15, 1991 and ending November 15, 1991

b. If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

3. Has an extension of time to file been previously granted for this tax year? ☒ Yes ☐ No

4. State in detail why you need the extension. Additional time is required in order to file a complete and accurate tax return for the year.

5a. If this form is for Form 706GS(D), 706GS(T), 990-BL, 990-PF, 990-T, 1041 (estate), 1042, 1120-ND, 4720, 6069, 8612, 8613, 8725, or 8804 enter the tentative tax. (see instructions) \$ 911

b. If this form is for Form 990-PF, 990-T, 1041 (estate), 1042, or 8804 enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. (see instructions)

c. Balance due (subtract line 5b from line 5a). Include your payment with this form, or deposit with the coupon if required (see instructions)

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete; and that I am authorized to prepare this form.

Signature

Date

File original and one copy. IRS will show below whether or not your application is approved and will return the copy.

Notice to Applicant—To Be Completed by IRS

☒ We HAVE approved your application. (Please attach this form to your return.)

☐ We HAVE NOT approved your application. (Please attach this form to your return.) However, because of your reasons stated above, we have granted a 10-day grace period from the date shown below or due date of your return, whichever is later. This 10-day grace period is considered to be a valid extension of time for purposes of elections otherwise required to be made on timely filed returns.

☐ We HAVE NOT approved your application. After considering your reasons stated above, we cannot grant your request for an extension of time to file. (We are not granting the 10-day grace period.)

☐ We cannot consider your application because it was filed after the due date of your return.

☐ Other

If the copy of this form is to be returned to an address other than that shown above, please enter the address where the copy should be sent.

| | | |
|---|--------------------------------------|--|
| Name | Gilbert & Wolfand, P.C. | |
| Please type or print. | 2201 Wisconsin Avenue, NW, Suite 320 | |
| Number and street (or P.O. Box number if mail is not delivered to street address) | Washington, DC 20007 | |
| City or town, state, and ZIP code | Exhibit 2B | |

For Paperwork Reduction Act Notice, see back of form.

Form 2758 (Rev. 11-89)

1-16-90

0046

2758 1

Form 2758

(Rev. November 1989)
Department of the Treasury
Internal Revenue ServiceApplication for Extension of Time To File
Certain Excise, Income, Information, and Other Returns
File a separate application for each return.OMB No. 1545-0148
Expires 10-31-92Please type or
print.File the original
and one copy by
the due date for
filing your return.
(See instructions
on back.)Name
Abraham Lincoln Opportunity Foundation, Inc.Number and street (or P.O. Box number if mail is not delivered to street address)
1275 Tremont PlaceCity or town, state and ZIP code
Denver, CO 80204Employer identification number
74-2358885

Note: Taxpayers who file a corporation income tax return, including Forms 990-C, 990-T, and 1120S, must use Form 7004 to request an extension of time to file.

Partnerships, REMICs, and trusts (except those that file Form 990-T) must use Form 8736 to request an extension of time to file.

1. An extension of time until September 15, 1991 is requested in which to file (check only one):
- | | | | | |
|--|--|--|--------------------------------------|------------------------------------|
| <input type="checkbox"/> Form 706GS (D) | <input type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 3520-A | <input type="checkbox"/> Form 8612 |
| <input type="checkbox"/> Form 706GS (T) | <input type="checkbox"/> Form 990-T (401(a) or 408(a) trust) | <input type="checkbox"/> Form 1042 | <input type="checkbox"/> Form 4720 | <input type="checkbox"/> Form 8613 |
| <input type="checkbox"/> Form 990 or 990EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 1042S | <input type="checkbox"/> Form 5227 | <input type="checkbox"/> Form 8725 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 1041 (estate) | <input type="checkbox"/> Form 1120-ND (4951 taxes) | <input type="checkbox"/> Form 6069 | <input type="checkbox"/> Form 8804 |

If organization does not have an office or place of business in the United States, check this box ☐

- 2a. For calendar year 19 90, or other tax year beginning and ending
- b. If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period
3. Has an extension of time to file been previously granted for this tax year? ☒ Yes ☐ No
4. State in detail why you need the extension. Additional time is required in order to file a complete and accurate tax return for the year. IRS

- 5a. If this form is for Form 706GS(D), 706GS(T), 990-BL, 990-PF, 990-T, 1041 (estate), 1042, 1120-ND, 4720, 6069, 8612, 8613, 8725, or 8804 enter the tentative tax. (See instructions.) \$ 38,791
- b. If this form is for Form 990-PF, 990-T, 1041 (estate), 1042, or 8804, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. (See instructions.) \$
- c. Balance due (subtract line 5b from line 5a). Include your payment with this form, or deposit with FTD Coupon if required. (See instructions.) PSC PHILA, PA \$

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature

Date 6-24-91

File original and one copy. IRS will show below whether or not your application is approved and will return the copy.

Notice to Applicant—To Be Completed by IRS

- ☒ We HAVE approved your application. (Please attach this form to your return.)
- ☐ We HAVE NOT approved your application. (Please attach this form to your return.) However, because of your reasons stated above, we have granted a 10-day grace period from the date shown below or due date of your return, whichever is later. This 10-day grace period is considered to be a valid extension of time for purposes of elections otherwise required to be made on timely filed returns.
- ☐ We HAVE NOT approved your application. After considering your reasons stated above, we cannot grant your request for an extension of time to file. (We are not granting the 10-day grace period.)
- ☐ We cannot consider your application because it was filed after the due date of your return.
- ☐ Other

If the copy of this form is to be returned to an address other than that shown above, please enter the address where the copy should be sent.

Name
Gilbert & Wolfand, P.C.

Please Type or Print
Number and street (or P.O. Box number if mail is not delivered to street address)
2201 Wisconsin Avenue, NW, Suite 320

City or town, state and ZIP code
Washington, DC 20007

Exhibit 28

For Paperwork Reduction Act Notice, see back of form.

Form 2758 (Rev. 11-89)

Form 2758
(Rev. November 1989)
Department of the Treasury
Internal Revenue Service

Application for Extension of Time To File
Certain Excise, Income, Information, and Other Returns
File a separate application for each return.

OMB No. 1545-0148
Expires 10-31-92

2758 1

Name
Abraham Lincoln Opportunity Foundation, Inc.

Please type or print.
File the original and one copy by the due date for filing your return. (See instructions on back.)

1275 Tremont Place

City, town, state and ZIP code
Denver, CO 80204

Employer identification number
74-2358885

Note: Taxpayers who file a corporation income tax return, including Forms 990-C, 990-T, and 1120S, must use Form 7004 to request an extension of time to file.
Partnerships, REMICs, and trusts (except those that file Form 990-T) must use Form 8736 to request an extension of time to file.

1. An extension of time until July 15, 1991 is requested in which to file (check only one):

| | | | | |
|--|--|--|-------------------------------------|------------------------------------|
| <input type="checkbox"/> Form 706GS (D) | <input type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 3520A | <input type="checkbox"/> Form 8612 |
| <input type="checkbox"/> Form 706GS (T) | <input type="checkbox"/> Form 990-T (401(a) or 408(a) trust) | <input type="checkbox"/> Form 1042 | <input type="checkbox"/> Form 4720 | <input type="checkbox"/> Form 8613 |
| <input type="checkbox"/> Form 990 or 990EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 1042S | <input type="checkbox"/> Form 5227 | <input type="checkbox"/> Form 8725 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 1041 (estate) | <input type="checkbox"/> Form 1120-ND (4951 taxes) | <input type="checkbox"/> Form 6069 | <input type="checkbox"/> Form 8804 |

If organization does not have an office or place of business in the United States, check this box ☐

2a. For calendar year 1990, or other tax year beginning and ending.

b. If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

3. Has an extension of time to file been previously granted for this tax year? ☐ Yes ☒ No

4. State in detail why you need the extension. Additional time is required in order to file a complete and accurate tax return for the year.

5a. If this form is for Form 706GS(D), 706GS(T), 990-BL, 990-PF, 990-T, 1041 (estate), 1042, 1120-ND, 4720, 6069, 8612, 8613, 8725, or 8804 enter the tentative tax. (see instructions) \$

b. If this form is for Form 990-PF, 990-T, 1041 (estate), 1042, or 8804 enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. (see instructions) \$

c. Balance due (subtract line 5b from line 5a). Include your payment with this form, or deposit with FTD Coupon if required. (see instructions) \$

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature ACG:1128 PA Date 7-23-91 IRS

File original and one copy. IRS will show below whether or not your application is approved and will return the copy.

Notice to Applicant—To Be Completed by IRS

☒ We HAVE approved your application. (Please attach this form to your return.)

☐ We HAVE NOT approved your application. (Please attach this form to your return.) However, because of your reasons stated above, we have granted a 10-day grace period from the date shown below or due date of your return, whichever is later. This 10-day grace period is considered to be a valid extension of time for purposes of elections otherwise required to be made on timely filed returns.

☐ We HAVE NOT approved your application. After considering your reasons stated above, we cannot grant your request for an extension of time to file. (We are not granting the 10-day grace period.)

☐ We cannot consider your application because it was filed after the due date of your return.

☐ Other

Date By Director

If the copy of this form is to be returned to an address other than that shown above, please enter the address where the copy should be sent:

Name
Gilbert & Wolfand, P.C.

Please type or print.
File the original and one copy by the due date for filing your return. (See instructions on back.)

2201 Wisconsin Avenue, NW, Suite 320

City, town, state and ZIP code
Washington, DC 20007

Exhibit 28

For Paperwork Reduction Act Notice, see back of form.

Form 2758 (Rev. 11-89)

| | | | | | | | | | | | | | | | | | | |
|---|--|---|--|--------------------------------------|--------------------------------------|--------------------------------------|---|--|------------------------------------|------------------------------------|---|--|-------------------------------------|------------------------------------|--------------------------------------|---|--|------------------------------------|
| Form 758 (Rev. November 1989) Department of the Treasury Internal Revenue Service | Application for Extension of Time to File Certain Excise, Income, Information, and Other Returns ▶ File a separate application for each return. | OMB No. 1545-0148 Expires 10-31-92 | | | | | | | | | | | | | | | | |
| Name Abraham Lincoln Opportunity Foundation, Inc. <small>Number and street (or P.O. Box number if mail is not delivered to street address)</small> 1275 Tremont Place City or town and ZIP code Denver, CO 80204 | | Employer identification number 74-2358885 | | | | | | | | | | | | | | | | |
| File the original and one copy by the due date for filing your return. (See instructions on back.) | | | | | | | | | | | | | | | | | | |
| Notes: Taxpayers who file a corporation income tax return, including Forms 990-C, 990-T, and 1120S, must use Form 7004 to request an extension of time to file. Partnerships, REMICs, and trusts (except those that file Form 990-T) must use Form 8736 to request an extension of time to file. | | | | | | | | | | | | | | | | | | |
| July 15, 1991 | | | | | | | | | | | | | | | | | | |
| 1. An extension of time until _____ is requested in which to file (check only one): <table style="width: 100%;"> <tr> <td><input checked="" type="checkbox"/> Form 706GS (D)</td> <td><input type="checkbox"/> Form 990-PF</td> <td><input type="checkbox"/> Form 1041-A</td> <td><input type="checkbox"/> Form 3520-A</td> </tr> <tr> <td><input type="checkbox"/> Form 706GS (T)</td> <td><input type="checkbox"/> Form 990-1 (401(a) or 408(a) trust)</td> <td><input type="checkbox"/> Form 1042</td> <td><input type="checkbox"/> Form 4720</td> </tr> <tr> <td><input checked="" type="checkbox"/> Form 990 or 990EZ</td> <td><input type="checkbox"/> Form 990-T (trust other than above)</td> <td><input type="checkbox"/> Form 1042S</td> <td><input type="checkbox"/> Form 5227</td> </tr> <tr> <td><input type="checkbox"/> Form 990-BL</td> <td><input type="checkbox"/> Form 1041 (estate)</td> <td><input type="checkbox"/> Form 1120-ND (4951 taxes)</td> <td><input type="checkbox"/> Form 6069</td> </tr> </table> | | | <input checked="" type="checkbox"/> Form 706GS (D) | <input type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 3520-A | <input type="checkbox"/> Form 706GS (T) | <input type="checkbox"/> Form 990-1 (401(a) or 408(a) trust) | <input type="checkbox"/> Form 1042 | <input type="checkbox"/> Form 4720 | <input checked="" type="checkbox"/> Form 990 or 990EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 1042S | <input type="checkbox"/> Form 5227 | <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 1041 (estate) | <input type="checkbox"/> Form 1120-ND (4951 taxes) | <input type="checkbox"/> Form 6069 |
| <input checked="" type="checkbox"/> Form 706GS (D) | <input type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 3520-A | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Form 706GS (T) | <input type="checkbox"/> Form 990-1 (401(a) or 408(a) trust) | <input type="checkbox"/> Form 1042 | <input type="checkbox"/> Form 4720 | | | | | | | | | | | | | | | |
| <input checked="" type="checkbox"/> Form 990 or 990EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 1042S | <input type="checkbox"/> Form 5227 | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 1041 (estate) | <input type="checkbox"/> Form 1120-ND (4951 taxes) | <input type="checkbox"/> Form 6069 | | | | | | | | | | | | | | | |
| If organization does not have an office or place of business in the United States, check this box <input type="checkbox"/> | | | | | | | | | | | | | | | | | | |
| 2a. For calendar year 19 <u>90</u>, or other tax year beginning _____ and ending _____ b If this tax year is for less than 12 months, check reason: <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Change in accounting period | | | | | | | | | | | | | | | | | | |
| 3. Has an extension of time to file been previously granted for this tax year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | | | | | | | | | | | | | | | | | |
| 4. State in detail why you need the extension. <u>Additional time is required in order to file a complete and accurate tax return for the year.</u> | | | | | | | | | | | | | | | | | | |
| 5a. If this form is for Form 706GS(D), 706GS(P), 990-BL, 990-PF, 990-T, 1041 (estate), 1042, 1120-ND, 4720, 6069, 8612, 8613, 8725, or 8804 enter the tentative tax, (see instructions) b. If this form is for Form 990-PF, 990-T, 1041 (estate), 1042, or 8804 enter any refundable credit and estimated tax payments made. Include any prior year overpayment allowed as a credit. (see instructions) c. Balance due (subtract line 5b from line 5a). Include your payment with this form, or deposit with FTD Coupon if required. (see instructions) | | | | | | | | | | | | | | | | | | |
| Signature and Verification | | | | | | | | | | | | | | | | | | |
| Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete; and that I am authorized to prepare this form. | | | | | | | | | | | | | | | | | | |
| Signature ▶ <u>ACG:1128 PA</u> Date ▶ <u>4-23-91</u> | | | | | | | | | | | | | | | | | | |
| File original and one copy. IRS will show below whether or not your application is approved and will return the copy. | | | | | | | | | | | | | | | | | | |
| Notice to Applicant—To Be Completed by IRS <input checked="" type="checkbox"/> We HAVE approved your application. (Please attach this form to your return.) <input type="checkbox"/> We HAVE NOT approved your application. (Please attach this form to your return.) However, because of your reasons stated above, we have granted a 10-day grace period from the date shown below or due date of your return, whichever is later. This 10-day grace period is considered to be a valid extension of time for purposes of elections otherwise required to be made on timely filed returns. <input type="checkbox"/> We HAVE NOT approved your application. After considering your reasons stated above, we cannot grant your request for an extension of time to file. (We are not granting the 10-day grace period.) <input type="checkbox"/> We cannot consider your application because it was filed after the due date of your return. <input type="checkbox"/> Other _____ | | | | | | | | | | | | | | | | | | |
| Date _____ By _____ Director _____ | | | | | | | | | | | | | | | | | | |
| If the copy of this form is to be returned to an address other than that shown above, please enter the address where the copy should be sent: | | | | | | | | | | | | | | | | | | |
| Name: <u>Gilbert & Wolfand, P.C.</u> Number and street (or P.O. Box number if mail is not delivered to street address): <u>1201 Wisconsin Avenue, NW, Suite 320</u> City or town and ZIP code: <u>Washington, DC 20007</u> | | | | | | | | | | | | | | | | | | |
| Exhibit 28 | | | | | | | | | | | | | | | | | | |

Form 990EZ (1990) Abraham Lincoln Opportunity Foundation, Inc. 74-2358885 0049

Part III Statement of Program Service Accomplishments—(See instructions.)

Describe what was achieved in carrying out your exempt purposes. Fully describe the services provided, the number of persons benefited, or other relevant information for each program title. Section 501(c)(3) and (4) organizations must also enter the amount of grants to others.

| | (Grants \$) | Expenses (Required for section 501(c)(3) and (4) organizations; optional for others) |
|---|-------------|---|
| 28 Production of TV program hotline for citizen participation in community problems | 143,072 | |
| 29 | | |
| 30 | | |
| 31 Other program services (attach schedule) | | |
| 32 Total program service expenses (add lines 28 through 31) | 143,072 | |

Part IV List of Officers, Directors, and Trustees (List each one even if not compensated. See instructions.)

| (A) Name and address | (B) Title and average hours per week devoted to position | (C) Compensation (if not paid, enter zero) | (D) Contributions to employee benefit plans | (E) Expense account and other allowances |
|-------------------------------|--|--|---|--|
| Howard Callaway Denver, CO | Chairman 20 Hrs./Wk | -0- | -0- | -0- |
| Kay Riddle Denver, CO | Secretary/Treas. 20 Hrs./Wk | -0- | -0- | -0- |

Part V Other Information—Section 501(c)(3) organizations and section 4947(a)(1) charitable trusts must also complete and attach Schedule A (Form 990). (See instruction C1.)

| | Yes | No |
|---|-------|-----|
| 33 Did the organization engage in any activity not previously reported to the Internal Revenue Service? | | X |
| If "Yes," attach a detailed description of each activity. | | |
| Were any changes made to the organizing or governing documents, but not reported to IRS? | | X |
| If "Yes," attach a conformed copy of the changes. | | |
| 34 If the organization had income from business activities, such as those reported on lines 2, 6, and 7 (among others), but NOT reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T. | | |
| a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? | | X |
| b If "Yes," have you filed a tax return on Form 990-T, Exempt Organization Business Income Tax Return, for this year? | | N/A |
| 36 Was there a liquidation, dissolution, termination, or substantial contraction during the year? (See instructions.) | | X |
| If "Yes," attach a statement as described in the instructions. | | |
| 37a Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ [37a] None | | |
| b Did you file Form 1120-POL, U.S. Income Tax Return for Certain Political Organizations, for this year? | | N/A |
| 38a Did you borrow from or make any loans to any officer, director, trustee, or key employee OR were any such loans made in a prior year and still unpaid at the start of the period covered by this return? | | X |
| b If "Yes," attach the schedule specified in the instructions and enter the amount involved [38b] N/A | | |
| 39 Section 501(c)(7) organizations.—Enter: | | |
| a Initiation fees and capital contributions included on line 9 | [39a] | |
| b Gross receipts, included on line 9, for public use of club facilities (see instructions) | [39b] | |
| c Does the club's governing instrument or any written policy statement provide for discrimination against any person because of race, color, or religion? (see instructions) | | |
| 40 List the states with which a copy of this return is filed. ▶ District of Columbia, Colorado | | |
| 41 The books are in care of ▶ The Organization Telephone no. ▶ (202) 484-2282 | | |
| 42 Section 4947(a)(1) charitable trusts filing Form 990EZ in lieu of Form 1041, U.S. Fiduciary Income Tax Return.—Check here ▶ <input type="checkbox"/> | | |

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Please Sign

Signature of officer _____ Date _____ Title _____

Preparer's signature ACG:WOLF Date 11/14/91 Check if self-employed ☐

Preparer's Use Only

Firm's name (or yours if self-employed) and address GILBERT & WOLFAND, P.C.
2201 Wisconsin Ave., NW, Washington, DC ZIP code 20007

Exhibit 28

ALOF
0050

ALOF.TR Abraham Lincoln Opportunity Foundation, Inc.
 #74-235885
 Form 990EZ - 1990

Schedule I - Part I, Line 1 - Contributors Whose Contributions for

 1990 Are \$5,000 or More:

| | | | |
|-----------------------------|--------------|------------|-----------|
| The Family Channel | 6/28/90 | \$ 22,250 | |
| International Family | 10/25/90 | 25,500 | |
| Entertainment, Inc. | | | |
| 1000 Certerville Turnpike | | | \$ 47,750 |
| Virginia Beach, VA 22463 | | | |
| Amilore Foundation | 9/6/90 | 5,000 | |
| 310 South Street | | | |
| Morristown, NJ 07960 | | | 5,000 |
| Bruce & Nancy Benson | 8/23/90 | 10,000 | |
| 21509 Cabrini Blvd | | | |
| Golden, CO 80401 | | | 10,000 |
| Howard E. Callaway | 9/20/90 | 5,000 | |
| Foundation, Inc. | 11/1/90 | 20,000 | |
| 1900 N. Michigan Ave., #520 | | | |
| Chicago, IL 60611 | | | 25,000 |
| RJR Nabisco, Inc. | 10/17/90 | 5,000 | |
| 50 New Commerce Blvd. | | | |
| Wilkes-Barre, PA 18762 | | | 5,000 |
| | | | \$ 92,750 |
| | | | ***** |

Exhibit 28

ALOF
0051

ALOF.TR Abraham Lincoln Opportunity Foundation, Inc.
#74-235885
Form 990EZ - 1990

Schedule II - Part I, Page 1, Line 16 - Other Expenses:

| | | |
|-----------------------|----|---------|
| Bank Charges | \$ | 58 |
| Graphics | | 20 |
| Handbook Expenses | | 159 |
| Interest | | 757 |
| Licenses & Fees | | 70 |
| Meals | | 115 |
| Payroll Taxes | | 1,812 |
| Photography | | 50 |
| Production Costs | | 79,574 |
| Seminars | | 265 |
| Telephone/Phone Banks | | 20,737 |
| Travel | | 1,844 |
| Total Other Expenses | \$ | 105,461 |

Schedule III - Part II, page 1, Line 26 - Liabilities:

| | Beginning of Year | End of Year |
|-----------------------|----------------------|----------------|
| Loan Payable | \$ 0 | \$ 45,247 |
| Payroll Taxes Payable | 0 | 731 |
| Total Liabilities | \$ 0 | \$ 45,978 |

Exhibit 28

Abraham Lincoln Oppor(. ity Foundation, Inc. 74 358885 Page 2

Schedule K (Form 990) 1990

Part IV Reason for Non-Private Foundation Status (See instructions for definitions.)

The organization is not a private foundation because it is (please check only ONE applicable box):

5 ☐ A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i). **ALOF 0053**

☐ A school. Section 170(b)(1)(A)(ii). (Also complete Part V, page 3.)

☐ A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).

4 ☐ A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).

9 ☐ A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter name, city, and state of hospital: _____

10 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete Support Schedule.)

11a ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete Support Schedule.)

11b ☐ A community trust. Section 170(b)(1)(A)(vi). (Also complete Support Schedule.)

12 ☐ An organization that normally receives: (a) no more than 1/3 of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975, and (b) more than 1/3 of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions—subject to certain exceptions. See section 509(a)(2). (Also complete Support Schedule.)

13 ☐ An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in: (1) boxes 5 through 12 above; or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). See section 509(a)(3).

Provide the following information about the supported organizations. (See instructions for Part IV, box 13.)

| (a) Name(s) of supported organization(s) | (b) Box number from above |
|--|---------------------------|
| | |
| | |
| | |

14 ☐ An organization organized and operated to test for public safety. Section 509(a)(4). (See specific instructions.)

Support Schedule (Complete only if you checked box 10, 11, or 12 above.) Use cash method of accounting.

| Calendar year (or fiscal year beginning in) | (a) 1985 | (b) 1988 | (c) 1987 | (d) 1986 | (e) Total |
|---|----------|----------|----------|----------|-----------|
| Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.) | -0- | 13,630 | 8,032 | 20,421 | 42,083 |
| 16 Membership fees received | | | | | |
| 17 Gross receipts from admissions, merchandise sold, or services performed, or furnishing of facilities in any activity that is not a business unrelated to the organization's charitable, etc., purpose | | | | | |
| 18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975 | 57 | 12 | -0- | -0- | 69 |
| 19 Net income from unrelated business activities not included in line 18 | | | | | |
| 20 Tax revenues levied for your benefit and either paid to you or expended on your behalf | | | | | |
| 21 The value of services or facilities furnished to you by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge. | | | | | |
| 22 Other income. Attach schedule. Do not include gain (or loss) from sale of capital assets | | | | | |
| 23 Total of lines 15 through 22 | 57 | 13,642 | 8,032 | 20,421 | 42,152 |
| 24 Line 23 minus line 17 | 57 | 13,642 | 8,032 | 20,421 | 42,152 |
| Enter 1% of line 23 | 1 | 136 | 80 | 204 | |
| Organizations described in box 10 or 11: | | | | | |
| a Enter 2% of amount in column (e), line 24 | | | | | 843 |
| b Attach a list (not open to public inspection) showing the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1986 through 1989 exceeded the amount shown in line 26a. Enter the sum of all excess amounts here | | | | | 31,415 |

(Continued on page 3)

Exhibit 28

0054

Schedule A (Form 990) 1990 Abraham Lincoln Opportunity Foundation, Inc.

74-235885

Page 3

Part IV Support Schedule (continued) (Complete only if you checked box 10, 11, or 12 on page 2.) N/A**27** Organizations described in box 12, page 2:

- a Attach a list for amounts shown on lines 15, 16, and 17, showing the name of, and total amounts received in each year from, each "disqualified person," and enter the sum of such amounts for each year:

(1989) (1988) (1987) (1986)

- b Attach a list showing, for 1986 through 1989, the name and amount included in line 17 for each person (other than "disqualified persons") from whom the organization received more during that year than the larger of: (1) the amount on line 25 for the year; or (2) \$5,000. Include organizations described in boxes 5 through 11 as well as individuals. Enter the sum of these excess amounts for each year:

(1989) (1988) (1987) (1986)

- 28** For an organization described in box 10, 11, or 12, page 2, that received any unusual grants during 1986 through 1989, attach a list (not open to public inspection) for each year showing the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not include these grants in line 15 above. (See specific instructions.)

Part V Private School Questionnaire

(To be completed ONLY by schools that checked box 6 in Part IV) N/A

| | Yes (1) | No (2) |
|--|------------|-----------|
| 29 Do you have a racially nondiscriminatory policy toward students by statement in your charter, bylaws, other governing instrument, or in a resolution of your governing body? | | |
| 30 Do you include a statement of your racially nondiscriminatory policy toward students in all your brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? | | |
| 31 Have you publicized your racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if you have no solicitation program, in a way that makes the policy known to all parts of the general community you serve? If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.) | | |
| 32 Do you maintain the following: | | |
| a Records indicating the racial composition of the student body, faculty, and administrative staff? | | |
| b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? | | |
| c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? | | |
| d Copies of all material used by you or on your behalf to solicit contributions? If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.) | | |
| 33 Do you discriminate by race in any way with respect to: | | |
| a Students' rights or privileges? | | |
| b Admissions policies? | | |
| c Employment of faculty or administrative staff? | | |
| d Scholarships or other financial assistance? (See instructions.) | | |
| e Educational policies? | | |
| f Use of facilities? | | |
| g Athletic programs? | | |
| h Other extracurricular activities? If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.) | | |
| 34a Do you receive any financial aid or assistance from a governmental agency? | | |
| b Has your right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached separate statement. | | |
| 35 Do you certify that you have complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation. (See instructions for Part V.) | | |

Exhibit 28

Schedule A (Form 990) 1990 Abraham Lincoln Opportunity Foundation, Inc. 74-2358885 Page 4

Part VI Lobbying Expenditures by Public Charities (see instructions)
(To be completed ONLY by an eligible organization that filed Form 5768) N/A ALOF 0055

Check here ☐ a If the organization belongs to an affiliated group (see instructions).
Check here ☐ b If you checked a and "limited control" provisions apply (see instructions).

| Limits on Lobbying Expenses | | (a) Affiliated group totals | (b) To be completed for ALL electing organizations |
|---|---|-----------------------------------|--|
| 36 Total (grassroots) lobbying expenses to influence public opinion | 36 | | |
| 37 Total lobbying expenses to influence a legislative body | 37 | | |
| 38 Total lobbying expenses (add lines 36 and 37) | 38 | | |
| 39 Other exempt purpose expenses (see Part VI instructions) | 39 | | |
| 40 Total exempt purpose expenses (add lines 38 and 39) (see instructions). | 40 | | |
| 41 Lobbying nontaxable amount. Enter the smaller of \$1,000,000 or the amount determined under the following table— | | | |
| If the amount on line 40 is— | The lobbying nontaxable amount is— | | |
| Not over \$500,000 | 20% of the amount on line 40 | | |
| Over \$500,000 but not over \$1,000,000 | \$100,000 plus 15% of the excess over \$500,000 | 41 | |
| Over \$1,000,000 but not over \$1,500,000 | \$175,000 plus 10% of the excess over \$1,000,000 | | |
| Over \$1,500,000 | \$225,000 plus 5% of the excess over \$1,500,000 | | |
| 42 Grassroots nontaxable amount (enter 25% of line 41) | 42 | | |
| (Complete lines 43 and 44. File Form 4720 if either line 36 exceeds line 42 or line 38 exceeds line 41.) | | | |
| 43 Excess of line 36 over line 42 | 43 | | |
| 44 Excess of line 38 over line 41 | 44 | | |

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 45–50 for details.)

| Calendar year (or fiscal year beginning in) ▶ | Lobbying Expenses During 4-Year Averaging Period | | | | |
|--|--|-------------|-------------|-------------|--------------|
| | (a) 1990 | (b) 1989 | (c) 1988 | (d) 1987 | (e) Total |
| 45 Lobbying nontaxable amount (see instructions) | | | | | |
| 46 Lobbying ceiling amount (150% of line 45(e)) | | | | | |
| 47 Total lobbying expenses (see instructions) | | | | | |
| 48 Grassroots nontaxable amount (see instructions) | | | | | |
| 49 Grassroots ceiling amount (150% of line 48(e)) | | | | | |
| 50 Grassroots lobbying expenses (see instructions) | | | | | |

Exhibit 28

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

| | Yes | No |
|--|-----|----|
|--|-----|----|

a Transfers from the reporting organization to a noncharitable exempt organization of:

(i) Cash

(ii) Other assets

b. Other Transactions:

(i) Sales of assets to a noncharitable exempt organization

(II) Purchases of assets from a noncharitable exempt organization

(III) Rental of facilities or equipment

(iv) Reimbursement arrangements.

(v) Loans or loan guarantees

(vi) Performance of services of

Sharing of facilities, equipment, mailing lists or other assets, or paid employment.

d. If the answer to any of the above is "Yes," complete the following schedule. The "Arr

If the answer to any of the above is "Yes," complete the following schedule. The amounts entered in the column below should always indicate the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, the column should also indicate the value of the goods, other assets, or services received.

[illegible]

52a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?

☐ Yes ☒ No

b If "Yes," complete the following schedule.

[illegible]

Exhibit 28

ALOF
0057

ALOF990A.TR

Abraham Lincoln Opportunity Foundation, Inc.
#74-2358885
1990 - 990EZ Schedule A

Line 26(b) - Contributors Whose Gifts for 1986 through 1989 Exceeded the

Amount Shown on Line 26a - \$843:

| | | | |
|-------------------------------|----------|--------------|--------------|
| Hal Krause | 12/16/86 | \$ 2,500 | |
| | | <u>2,500</u> | |
| | | | \$ 5,000 |
| Howard H. Callaway Foundation | 2/9/87 | \$ 5,000 | |
| | 2/24/88 | 3,548 | |
| | 5/27/88 | <u>3,082</u> | |
| | | | 11,630 |
| Bruce & Mary Benson | 2/24/88 | \$ 7,000 | |
| | 6/17/86 | <u>5,000</u> | |
| | | | 12,000 |
| Colorado Republican Committee | 6/3/86 | | 4,500 |
| LePrino Foods Co. | 5/9/86 | | <u>2,500</u> |
| | | | \$ 35,630 |

| Short Form | | Return of Organization Exempt From Income Tax | | 1991 |
|--|--|--|----|--|
| 990EZ | | Under section 501(c) of the Internal Revenue Code (except black lung benefit trust or private foundation) or section 4947(a)(1) charitable trust | | This Form is Open to Public Inspection |
| Department of the Treasury Internal Revenue Service | | You may have to use a copy of this return to satisfy state reporting requirements. | | 19 |
| A For the calendar year 1991, or fiscal year beginning , 1991, and ending | | | | |
| B Name of organization Abraham Lincoln Opportunity Foundation | | C Employer identification number 74-2358885 | | |
| D Number and street (or P.O. box no., if mail is not delivered to street address) 440 First Street, NW | | E State registration number | | |
| F City, town, or post office, state, and ZIP code Washington, DC 20001 | | G Enter four-digit group exemption number (GEM) | | |
| H Check type of organization—Exempt under section <input checked="" type="checkbox"/> 501(c) (3) (insert number), OR <input type="checkbox"/> section 4947(a)(1) trust | | | | |
| I Check <input type="checkbox"/> if exemption application pending. | | | | |
| J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) <input type="checkbox"/> Check <input type="checkbox"/> if address changed. | | | | |
| K Check <input type="checkbox"/> if your gross receipts are normally not more than \$25,000. You need not file a completed return with IRS; but if you received a Form 990 Package in the mail, you should file a return without financial data. Some states require a completed return. | | | | |
| L Enter your 1991 gross receipts (add back lines 5b, 6b, and 7b, to line 9) <input type="checkbox"/> \$ <input type="checkbox"/> If \$100,000 or more, you must file Form 990 instead of Form 990EZ. | | | | |
| Part I Statement of Revenue, Expenses, and Changes in Net Assets or Fund Balances | | | | |
| 1 Contributions, gifts, grants, and similar amounts received (attach schedule—see instructions) | | 1 48,950 | | |
| 2 Program service revenue | | 2 | | |
| 3 Membership dues and assessments (see instructions) | | 3 | | |
| 4 Investment income | | 4 108 | | |
| 5a Gross amount from sale of assets other than inventory | | 5a | | |
| 5b Less: cost or other basis and sales expenses | | 5b | | |
| 5c Gain or (loss) (line 5a less line 5b) (attach schedule) | | 5c | | |
| 6 Special events and activities (attach schedule—see instructions): | | | | |
| 6a Gross revenue (not including \$ of contributions reported on line 1) | | 6a | | |
| 6b Less: direct expenses | | 6b | | |
| 6c Net income or (loss) (line 6a less line 6b) | | 6c | | |
| 7a Gross sales less returns and allowances | | 7a | | |
| 7b Less: cost of goods sold | | 7b | | |
| 7c Gross profit or (loss) (line 7a less line 7b) | | 7c | | |
| 8 Other revenue (describe) | | 8 | | |
| 9 Total revenue (add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8) | | 9 49,058 | | |
| 10 Grants and similar amounts paid (attach schedule) Schedule II | | 10 2,500 | | |
| 11 Benefits paid to or for members | | 11 | | |
| 12 Salaries, other compensation, and employee benefits | | 12 | | |
| 13 Professional fees and other payments to independent contractors | | 13 | | |
| 14 Occupancy, rent, utilities, and maintenance | | 14 | | |
| 15 Printing, publications, postage, and shipping | | 15 | | |
| 16 Other expenses (describe) Schedule III | | 16 30,339 | | |
| 17 Total expenses (add lines 10 through 16) | | 17 32,839 | | |
| 18 Excess or (deficit) for the year (line 9 less line 17) | | 18 16,219 | | |
| 19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) | | 19 (43,579) | | |
| 20 Other changes in net assets or fund balances (attach explanation) | | 20 | | |
| 21 Net assets or fund balances at end of year (combine lines 18 through 20) (must agree with line 27, column (B)) | | 21 (27,360) | | |
| Part II Balance Sheets—If total assets on line 25, column (B) are \$250,000 or more, you must file Form 990 instead of Form 990EZ. | | | | |
| 22 Cash, savings, and investments | | (A) Beginning of year | 22 | (B) End of year |
| 23 Land and buildings | | 2,399 | 23 | 1,118 |
| 24 Other assets (describe) | | | 24 | |
| 25 Total assets | | 2,399 | 25 | 1,118 |
| 26 Total liabilities (describe) Schedule IV | | 45,978 | 26 | 28,478 |
| 27 Net assets or fund balances (column (B) must agree with line 21.) | | (43,579) | 27 | (27,360) |

For Paperwork Reduction Act Notice, see page 1 of the separate instructions.

Cat. No. 106421

Form 990EZ (1991)

ALOF
0058

Exhibit 28

1/24/92 1,240A

| | | | |
|---|--|--|--|
| 2758 <small>(Rev. 10-31-92)</small> | Application for Extension of Time to File Certain Exempt, Income, Information, and Other Returns | | <small>Expires 10-31-92</small> ALOF 0059 |
| <small>File a separate application for each return.</small> | | | |
| <small>Indicate type of return. See the original and one copy by the due date for filing your return. (See instructions on back.)</small> | Name Abraham Lincoln Opportunity Foundation, Inc. Number and street or P.O. box no. if mail is not delivered to street address 440 First Street, NW City, town, or post office, state, and ZIP code (for foreign address, see instructions) Washington, DC 20001 | | Apt. or suite no. 400 Employer identification number 74-2358885 |

Note: Taxpayers who file a corporation income tax return, including Forms 990-C, 990-T, and 1120S, must use Form 7004 to request an extension of time to file.

Partnerships, REMICs, and trusts (except those that file Form 990-T) must use Form 8736 to request an extension of time to file.

1 An extension of time until December 15, 1992 is requested in which to file (check only one):

| | | | | |
|---|--|---|--------------------------------------|------------------------------------|
| <input type="checkbox"/> Form 706GS (D) | <input type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 3520-A | <input type="checkbox"/> Form 8612 |
| <input type="checkbox"/> Form 706GS (T) | <input type="checkbox"/> Form 990-T (401(a) or 408(a) trust) | <input type="checkbox"/> Form 1042 | <input type="checkbox"/> Form 4720 | <input type="checkbox"/> Form 8613 |
| <input checked="" type="checkbox"/> Form 990 or 990EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 1042S | <input type="checkbox"/> Form 5227 | <input type="checkbox"/> Form 8725 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 1041 (estate) (see instructions) | <input type="checkbox"/> Form 1120-ND (981 taxes) | <input type="checkbox"/> Form 8088 | <input type="checkbox"/> Form 8804 |

If organization does not have an office or place of business in the United States, check this box ☐ **Yes** ☐ **No**

2a For calendar year 19 91, or other tax year beginning 11-11-92 and ending 11-11-92

2b If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

3 Has an extension of time to file been previously granted for this tax year? ☒ **Yes** ☐ **No**

4 State in detail why you need the extension.
Additional time is needed to gather the information necessary to file a complete and accurate return.

5a If this form is for Form 706GS(D), 706GS(T), 990-BL, 990-PF, 990-T, 1041 (estate), 1042, 1120-ND, 4720, 8069, 8612, 8613, 8725, or 8804, enter the tentative tax, less any nonrefundable credits. (See instructions.)

b If this form is for Form 990-PF, 990-T, 1041 (estate), 1042, or 8804, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.

c Balance due (subtract line 5b from line 5a). Include your payment with this form, or deposit with FTD Coupon if required. (See instructions.)

28 PA.
FOU
MAR

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete; and that I am authorized to prepare this form.

Signature AC Gilbert Date 11-11-92

File original and one copy. IRS will show below whether or not your application is approved and will return the copy.

Notice to Applicant—To Be Completed by IRS

☐ We HAVE approved your application. (Please attach this form to your return.)

☐ We HAVE NOT approved your application. (Please attach this form to your return.) However, because of your reasons stated above, we have granted a 10-day grace period from the date shown below or due date of your return, whichever is later. This 10-day grace period is considered a valid extension of time for purposes of elections otherwise required to be made on timely filed returns.

☐ We HAVE NOT approved your application. After considering your reasons stated above, we cannot grant your request for an extension of time to file. (We are not granting the 10-day grace period.)

☒ We cannot consider your application because it was filed after the due date of your return.

OTHER WE CANNOT CONSIDER YOUR APPLICATION BECAUSE YOU HAVE BEEN GRANTED THE MAXIMUM TIME.

Date _____ By _____

If the copy of this form is to be returned to an address other than that shown above, please enter the address where the copy should be sent.

| | | | |
|-----------------------------|--|--|---------------------------------|
| Please Type or Print | Name Gilbert & Wolfand, P.C. Number and street or P.O. box no. if mail is not delivered to street address 2201 Wisconsin Avenue, NW City, town, or post office, state, and ZIP code (for foreign address, see instructions) Washington, DC 20007 | | Apt. or suite no. 320 |
|-----------------------------|--|--|---------------------------------|

For Paperwork Reduction Act Notice, see back of form. Cat. No. 115758 **Form 2758** (Rev. 6-91) 9/11/91 2,441

Exhibit 28

| | | | | | | | | | |
|--|---|---|--|---|--|--|--|--|---|
| 2758 <small>(Rev. June 1991)</small> Department of the Treasury Internal Revenue Service | Application for Extension of Time To Certain Excise, Income, Information, and Other Returns <small>File a separate application for each return.</small> | <small>OMB No. 1545-0148 Expires 10-31-92</small> ALOF 0060 | | | | | | | |
| <small>Please type or print. File the original and one copy by the due date for filing your return. (See instructions on back.)</small> | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2">Name Abraham Lincoln Opportunity Foundation, Inc.</td> </tr> <tr> <td>Number and street (or P.O. box no. if mail is not delivered to street address) 440 First Street, NW</td> <td>Apt. or suite no. 400</td> </tr> <tr> <td colspan="2">City, town, or post office, state, and ZIP code (for foreign address, see instructions) Washington, DC 20001</td> </tr> </table> | Name Abraham Lincoln Opportunity Foundation, Inc. | | Number and street (or P.O. box no. if mail is not delivered to street address) 440 First Street, NW | Apt. or suite no. 400 | City, town, or post office, state, and ZIP code (for foreign address, see instructions) Washington, DC 20001 | | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>Employer identification number 74-2358885</td> </tr> </table> | Employer identification number 74-2358885 |
| Name Abraham Lincoln Opportunity Foundation, Inc. | | | | | | | | | |
| Number and street (or P.O. box no. if mail is not delivered to street address) 440 First Street, NW | Apt. or suite no. 400 | | | | | | | | |
| City, town, or post office, state, and ZIP code (for foreign address, see instructions) Washington, DC 20001 | | | | | | | | | |
| Employer identification number 74-2358885 | | | | | | | | | |
| <small>Note: Taxpayers who file a corporation income tax return, including Forms 990-C, 990-T, and 1120S, must use Form 7004 to request an extension of time to file.</small> | | | | | | | | | |
| <small>Partnerships, REMICs, and trusts (except those that file Form 990-T) must use Form 8736 to request an extension of time to file.</small> | | | | | | | | | |
| November 15, 1992 | | | | | | | | | |
| 1. An extension of time until _____ is requested in which to file (check only one): <input type="checkbox"/> Form 706GS (D) <input type="checkbox"/> Form 990-PF <input type="checkbox"/> Form 1041-A <input type="checkbox"/> Form 3520-A <input type="checkbox"/> Form 8612 <input type="checkbox"/> Form 706GS (T) <input type="checkbox"/> Form 990-T (401(a) or 408(a) trust) <input type="checkbox"/> Form 1042 <input type="checkbox"/> Form 4720 <input type="checkbox"/> Form 8613 <input checked="" type="checkbox"/> Form 990 or 990-EZ <input type="checkbox"/> Form 990-T (trust other than above) <input type="checkbox"/> Form 1042S <input type="checkbox"/> Form 5227 <input type="checkbox"/> Form 8725 <input type="checkbox"/> Form 990-BL <input type="checkbox"/> Form 1041 (estate) (see instructions) <input type="checkbox"/> Form 1120-ND (4951 taxes) <input type="checkbox"/> Form 6069 <input type="checkbox"/> Form 8804 <small>If organization does not have an office or place of business in the United States, check this box. <input type="checkbox"/></small> | | | | | | | | | |
| 2a. For calendar year 19 <u>91</u> , or other tax year beginning _____ and ending _____ b. If this tax year is for less than 12 months, check reason: <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Change in accounting period 3. Has an extension of time to file been previously granted for this tax year? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | | | | | | | | | |
| 4. State in detail why you need the extension. _____ Additional time is needed to gather the information necessary to file a complete and accurate return. _____ | | | | | | | | | |
| 5a. If this form is for Form 706GS(D), 706GS(T), 990-BL, 990-PF, 990-T, 1041 (estate), 1042, 1120-ND, 4720, 6069, 8612, 8613, 8725, or 8804, enter the tentative tax, less any nonrefundable credits. (See instructions.) \$ _____ b. If this form is for Form 990-PF, 990-T, 1041 (estate), 1042, or 8804, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. \$ _____ c. Balance due (subtract line 5b from line 5a). Include your payment with this form, or deposit with FTD. Coupon if required. (See instructions.) \$ _____ | | | | | | | | | |
| Signature and Verification | | | | | | | | | |
| <small>Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.</small> | | | | | | | | | |
| Signature <u><i>Daniel S. Edelmann CPA</i></u> Date <u>8/24/92</u> | | | | | | | | | |
| File original and one copy. IRS will show below whether or not your application is approved and will return the copy. | | | | | | | | | |
| Notice to Applicant—To Be Completed by IRS | | | | | | | | | |
| <input checked="" type="checkbox"/> We HAVE approved your application. (Please attach this form to your return.) <input type="checkbox"/> We HAVE NOT approved your application. (Please attach this form to your return.) However, because of your reasons stated above, we have granted a 10-day grace period from the date shown below or due date of your return, whichever is later. This 10-day grace period is considered a valid extension of time for purposes of elections otherwise required to be made on timely filed returns. <input type="checkbox"/> We HAVE NOT approved your application. After considering your reasons stated above, we cannot grant your request for an extension of time to file. (We are not granting the 10-day grace period.) <input type="checkbox"/> We cannot consider your application because it was filed after the due date of your return. <input type="checkbox"/> Other <u>final</u> | | | | | | | | | |
| Date <u>08/25/92</u> By <u>0326005</u> | | | | | | | | | |
| If the copy of this form is to be returned to an address other than that shown above, please enter the address where the copy should be sent. | | | | | | | | | |
| Please Type or Print | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2">Name Gilbert & Wolfand, P.C.</td> </tr> <tr> <td>Number and street (or P.O. box no. if mail is not delivered to street address) 2201 Wisconsin Avenue, NW</td> <td>Apt. or suite no. 320</td> </tr> <tr> <td colspan="2">City, town, or post office, state, and ZIP code (for foreign address, see instructions) Washington, DC 20007</td> </tr> </table> | | Name Gilbert & Wolfand, P.C. | | Number and street (or P.O. box no. if mail is not delivered to street address) 2201 Wisconsin Avenue, NW | Apt. or suite no. 320 | City, town, or post office, state, and ZIP code (for foreign address, see instructions) Washington, DC 20007 | | |
| Name Gilbert & Wolfand, P.C. | | | | | | | | | |
| Number and street (or P.O. box no. if mail is not delivered to street address) 2201 Wisconsin Avenue, NW | Apt. or suite no. 320 | | | | | | | | |
| City, town, or post office, state, and ZIP code (for foreign address, see instructions) Washington, DC 20007 | | | | | | | | | |
| <small>For Paperwork Reduction Act Notice, see back of form.</small> | | | | | | | | | |
| Cat. No. 119768 Form 2758 (Rev. 8-91) 8/11/91 2,441 | | | | | | | | | |

Exhibit 28

| | | |
|--|--|---|
| Form 2758 (Rev. June 1991) Department of the Treasury Internal Revenue Service | Application for Extension of Time to File Certain Excise, Income, Information, and Other Returns | U.S. NO. 1043-0144 Expires 10-31-92 ALOF 0061 Employer identification number 74-2358885 |
| b. File a separate application for each return. | | |
| Please type or print. Fill the original and one copy by the due date for filing your return. (See instructions on back.) | Name Abraham Lincoln Opportunity Foundation, Inc. Number and street for P.O. box no. if mail is not delivered to street address 440 First Street, NW Apt. or suite no. 400 City, town, or post office, state, and ZIP code (for foreign address, see instructions) Washington, DC 20001 | Employer identification number 74-2358885 |

Note: Taxpayers who file a corporation income tax return, including Forms 990-C, 990-T, and 1120S, must use Form 7004 to request an extension of time to file.

Partnerships, REMICs, and trusts (except those that file Form 990-T) must use Form 8736 to request an extension of time to file.

1. An extension of time until September 15, 1992 is requested in which to file (check only one):

| | | | | |
|--|--|---|--------------------------------------|------------------------------------|
| <input type="checkbox"/> Form 706GS (D) | <input type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 3520-A | <input type="checkbox"/> Form 8612 |
| <input type="checkbox"/> Form 706GS (T) | <input type="checkbox"/> Form 990-T (401(a) or 408(a) trust) | <input type="checkbox"/> Form 1042 | <input type="checkbox"/> Form 4720 | <input type="checkbox"/> Form 8613 |
| <input checked="" type="checkbox"/> Form 990 or 990-EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 1042S | <input type="checkbox"/> Form 5227 | <input type="checkbox"/> Form 8725 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 1041 (estate) (see instructions) | <input type="checkbox"/> Form 1120-ND (951 taxes) | <input type="checkbox"/> Form 6069 | <input type="checkbox"/> Form 8804 |

If organization does not have an office or place of business in the United States, check this box ☐ **Yes** ☐ **No**

2a. For calendar year 19 91, or other tax year beginning and ending

b. If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

3. Has an extension of time to file been previously granted for this tax year? ☐ Yes ☒ No

4. State in detail why you need the extension. Additional time is needed to gather the information necessary to file a complete and accurate return.

5a. If this form is for Form 706GS(D), 706GS(T), 990-BL, 990-PF, 990-T, 1041 (estate), 1042, 1120-ND, 4720, 6069, 8612, 8613, 8725, or 8804, enter the tentative tax, less any nonrefundable credits. (See instructions.) \$

b. If this form is for Form 990-PF, 990-T, 1041 (estate), 1042, or 8804, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. \$

c. Balance due (subtract line 5b from line 5a). Include your payment with this form, or deposit with FTD. \$

 Coupon if required. (See instructions.) \$

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature *Shirley B. Edelman, CPA* Date 11/13/92

Signature *Shirley B. Edelman, CPA* Date 11/15/92

File original and one copy. IRS will show below whether or not your application is approved and will return the copy.

Notice to Applicant—To Be Completed by IRS

☒ We HAVE approved your application. (Please attach this form to your return.)

☐ We HAVE NOT approved your application. (Please attach this form to your return.) However, because of your reasons stated above, we have granted a 10-day grace period from the date shown below or due date of your return, whichever is later. This 10-day grace period is considered a valid extension of time for purposes of elections otherwise required to be made on timely filed returns.

☐ We HAVE NOT approved your application. After considering your reasons stated above, we cannot grant your request for an extension of time to file. (We are not granting the 10-day grace period.)

☐ We cannot consider your application because it was filed after the due date of your return.

☐ Other

RECEIVED
10/13/92
071692
PSC 20
PHILA PA

Date By *Shirley B. Edelman*

If the copy of this form is to be returned to an address other than that shown above, please enter the address where the copy should be sent.

| | | |
|----------------------|--|--|
| Please Type or Print | Name Gilbert & Wolfand, P.C. Number and street for P.O. box no. if mail is not delivered to street address 2201 Wisconsin Avenue, NW Apt. or suite no. 320 City, town, or post office, state, and ZIP code (for foreign address, see instructions) Washington, DC 20007 | |
|----------------------|--|--|

For Paperwork Reduction Act Notice, see back of form. Cat. No. 119758 Form 2758 (Rev. 6-91)

Exhibit 28 8-11-91 2.441

| | | | |
|--|--|---------------------------------|---|
| Form 2758 (Rev. June 1991) | Application for Extension of Time to File Certain Excise, Income, Information, and Other Returns | | Effective 10-21-92 |
| ▶ File a separate application for each return. | | | |
| Please type or print. File the original and one copy by the due date for filing your return. (See instructions on back.) | Name Abraham Lincoln Opportunity Foundation, Inc. | | ALOF 0062 |
| Number and street for P.O. box no. if mail is not delivered to street address 440 First Street, NW | | Apt. or suite no. 400 | |
| City, town, or post office, state, and ZIP code (for foreign address, see instructions) Washington, DC 20001 | | | |
| | | | Employer identification number 74-2358885 |

Note: Taxpayers who file a corporation income tax return, including Forms 990-C, 990-T, and 1120S, must use Form 7004 to request an extension of time to file.

Partnerships, REMICs, and trusts (except those that file Form 990-T) must use Form 8736 to request an extension of time to file.

1 An extension of time until July 15, 1992 is requested in which to file (check only one):

| | | | | |
|--|--|--|--------------------------------------|------------------------------------|
| <input type="checkbox"/> Form 706GS (D) | <input type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 3520-A | <input type="checkbox"/> Form 8612 |
| <input type="checkbox"/> Form 706GS (T) | <input type="checkbox"/> Form 990-T (401(a) or 408(a) trust) | <input type="checkbox"/> Form 1042 | <input type="checkbox"/> Form 4720 | <input type="checkbox"/> Form 8613 |
| <input checked="" type="checkbox"/> Form 990 or 990-EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 1042S | <input type="checkbox"/> Form 5227 | <input type="checkbox"/> Form 8725 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 1041 (estate) (see instructions) | <input type="checkbox"/> Form 1120-ND (4951 taxes) | <input type="checkbox"/> Form 8068 | <input type="checkbox"/> Form 8804 |

If organization does not have an office or place of business in the United States, check this box ☐

2a For calendar year 1991, or other tax year beginning and ending

b If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

3 Has an extension of time to file been previously granted for this tax year? ☐ Yes ☒ No

4 State in detail why you need the extension. Additional time is needed to gather the information necessary to file a complete and accurate return.

5a If this form is for Form 706GS(D), 706GS(T), 990-BL, 990-PF, 990-T, 1041 (estate), 1042, 1120-ND, 4720, 8068, 8612, 8613, 8725, or 8804, enter the tentative tax, less any nonrefundable credits. (See instructions.) \$ _____

b If this form is for Form 990-PF, 990-T, 1041 (estate), 1042, or 8804, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit \$ _____

c Balance due (subtract line 5b from line 5a). Include your payment with this form, or deposit with FTD Coupon if required. (See instructions.) \$ _____

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature James A. Schekman, CPA Date 4/6/92

File original and one copy. IRS will show below whether or not your application is approved and will return the copy.

Notice to Applicant—To Be Completed by IRS

☒ We HAVE approved your application. (Please attach this form to your return.)

☐ We HAVE NOT approved your application. (Please attach this form to your return.) However, because of your reasons stated above, we have granted a 10-day grace period from the date shown below or due date of your return, whichever is later. This 10-day grace period is considered a valid extension of time for purposes of elections otherwise required to be made on timely filed returns.

☐ We HAVE NOT approved your application. After considering your reasons stated above, we cannot grant your request for an extension of time to file. (We are not granting the 10-day grace period.)

☐ We cannot consider your application because it was filed after the due date of your return.

☐ Other _____

By: Joseph P. C.
Director

One _____ By: _____

If the copy of this form is to be returned to an address other than that shown above, please enter the address where the copy should be sent:

| | | | |
|--|---|--|---------------------------------|
| Name Gilbert & Wolfand, P.C. | Number and street for P.O. box no. if mail is not delivered to street address 2201 Wisconsin Avenue, NW | | Apt. or suite no. 320 |
| City, town, or post office, state, and ZIP code (for foreign address, see instructions) Washington, DC 20007 | | | |

For Paperwork Reduction Act Notice, see back of form. Cat. No. 119768 Form 2758 (Rev. 6-91)

Exhibit 28 5/11/91 2,441

Form 990-EZ (1997) Abraham Lincoln Opportunity Foundation 74-2356863 Page 2

Part III Statement of Program Service Accomplishments—(See instructions.)

Describe what was achieved in carrying out your exempt purposes. Fully describe the services provided, the number of persons benefited, or other relevant information for each program title.

28 Production of TV program hotline for citizen participation in community problems (Grants \$) 30,339

29 (Grants \$) ALOF 0063

30 (Grants \$)

31 Other program services (attach schedule) (Grants \$)

32 Total program service expenses (add lines 28 through 31) 30,339

Part IV List of Officers, Directors, and Trustees (List each one even if not compensated. See instructions.)

| (A) Name and address | (B) Title and average hours per week devoted to position | (C) Compensation (if not paid, enter zero) | (D) Contributions to employee benefit plans | (E) Expense account and other allowances |
|------------------------------|--|--|---|--|
| Howard Callaway Denver CO | Chairman 20 Hrs./Wk | -0- | -0- | -0- |
| Key Riddle Denver CO | Secretary/Treas. 20 Hrs./Wk | -0- | -0- | -0- |
| | | | | |
| | | | | |

Part V Other Information—Section 501(c)(3) organizations and section 4947(a)(1) charitable trusts must also complete and attach Schedule A (Form 990). (See instruction C1.)

33 Did the organization engage in any activity not previously reported to the Internal Revenue Service? ☒ Yes ☐ No

34 Were any changes made to the organizing or governing documents but not reported to IRS? ☒ Yes ☐ No

35 If the organization had income from business activities, such as those reported on lines 2, 6, and 7 (among others), but NOT reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T.

a Did the organization have unrelated gross income of \$1,000 or more during the year covered by this return? ☒ No ☐ Yes

b If "Yes," have you filed a tax return on Form 990-T, Exempt Organization Business Income Tax Return, for this year? ☒ No ☐ Yes

36 Was there a liquidation, dissolution, termination, or substantial contraction during the year? (See instructions.) ☒ No ☐ Yes

37 a Enter amount of political expenditures, direct or indirect, as described in the instructions. ▶ 37a None

b Did you file Form 1120-POL, U.S. Income Tax Return for Certain Political Organizations, for this year? ☒ No ☐ Yes

38 a Did you borrow from, or make any loans to, any officer, director, trustee, or key employee, OR were any such loans made in a prior year and still unpaid at the start of the period covered by this return? ☒ No ☐ Yes

b If "Yes," attach the schedule specified in the instructions and enter the amount involved 38b N/A

39 Section 501(c)(7) organizations.—Enter:

a Initiation fees and capital contributions included on line 9 39a

b Gross receipts, included on line 9, for public use of club facilities (see instructions). 39b

40 Does the club's governing instrument or any written policy statement provide for discrimination against any person because of race, color, or religion? (See instructions.) ☒ No ☐ Yes

41 List the states with which a copy of this return is filed. ▶ District of Columbia Colorado

42 The books are in care of ▶ The Organization Telephone no. ▶ (202) 484-2282

43 Located at ▶ Page 1

44 Section 4947(a)(1) charitable trusts filing Form 990-EZ in lieu of Form 1041, U.S. Fiduciary Income Tax Return.—Check here ▶ ☐ and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 44

Please Sign Here *Key M. Riddle* 13-5-93 Secretary/Treasurer

Paid Preparer's Signature *ACG:WJL CPA* Date 3/3/93 Check if self-employed ☐

Preparer's Name (or yours if self-employed) and address GILBERT & WOLFAND, P.C.
2201 Wisconsin Ave., NW, Washington, DC 20007 ZIP code 20007

Exhibit 28

ALOF
0084

ALOF.TR Abraham Lincoln Opportunity Foundation, Inc.
#74-235885
Form 990EZ 1991

Schedule I - Part I, Line 1 - Contributors Whose Contributions for
1991 Are \$5,000 or More:

| | | |
|--|---------|-----------|
| Howard H. Callaway Foundation, Inc. 1900 N. Michigan Ave., #520 Chicago, IL 60611 | 8/22/91 | 10,000 |
| Citizens Against Government Waste 1301 Connecticut Avenue, NW Suite 400 Washington, DC 20036 | 8/2/91 | 37,000 |
| | | \$ 47,000 |

Schedule II - Part I, Page 1, Line 10 - Grants:

| | | |
|----------------------|---------|----------|
| West Georgia College | 2/11/91 | \$ 2,500 |
|----------------------|---------|----------|

Schedule III - Part I, Page 1, Line 16 - Other Expenses:

| | |
|----------------------|-----------|
| Bank Charges | \$ 2 |
| Interest | 637 |
| Office Expenses | 50 |
| Payroll Taxes | 455 |
| Photography | 278 |
| Production Costs | 28,917 |
| Total Other Expenses | \$ 30,339 |

Schedule IV - Part II, Page 1, Line 26 - Liabilities:

| | Beginning of Year | End of Year |
|-----------------------|----------------------|----------------|
| Loan Payable | \$ 45,247 | \$ 27,747 |
| Payroll Taxes Payable | 731 | 731 |
| Total Liabilities | \$ 45,978 | \$ 28,478 |

Exhibit 28

SCHEDULE A
(Form 990)

 Department of the Treasury
 Internal Revenue Service

Organization Exempt Under 501(c)(3)

 (Except Private Foundation, 501(c)(3), 501(h), or Section 4947(a)(1) Charitable Trust
 Supplementary Information

Attach to Form 990 (or Form 990EZ).

OMB No. 1545-0047

1991

 Name **Abraham Lincoln Opportunity Foundation**

 Employer identification number
74-2358885
Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
 (See specific instructions.) (List each one. If there are none, enter "None.")

| (a) Name and address of employees paid more than \$30,000 | (b) Title and average hours per week devoted to position | (c) Compensation | (d) Contributions to employee benefit plans | (e) Expense account and other allowances |
|---|--|------------------|---|--|
| None | | | | ALOF 0065 |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| Total number of other employees paid over \$30,000 | | -0- | | |

Part II Compensation of the Five Highest Paid Persons for Professional Services
 (See specific instructions.) (List each one. If there are none, enter "None.")

| (a) Name and address of persons paid more than \$30,000 | (b) Type of service | (c) Compensation |
|--|---------------------|------------------|
| None | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| Total number of others receiving over \$30,000 for professional services | | -0- |

Part III Statements About Activities

| | Yes | No |
|---|-----|----|
| 1 During the year, have you attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the legislative activities. \$ _____ Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. For other organizations checking "Yes," attach a statement giving a detailed description of the legislative activities AND either complete Part VI-B or attach a classified schedule of the expenses paid or incurred. | 1 | X |
| 2 During the year, have you, either directly or indirectly, engaged in any of the following acts with a trustee, director, principal officer, or creator of your organization, or any taxable organization or corporation with which such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary: | | |
| a Sale, exchange, or leasing of property? | 2a | X |
| b Lending of money or other extension of credit? | 2b | X |
| c Furnishing of goods, services, or facilities? | 2c | X |
| d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? | 2d | X |
| e Transfer of any part of your income or assets? | 2e | X |
| If the answer to any question is "Yes," attach a detailed statement explaining the transactions. | | |
| 3 Do you make grants for scholarships, fellowships, student loans, etc.? | 3 | X |
| 4 Attach a statement explaining how you determine that individuals or organizations receiving grants or loans from you in furtherance of your charitable programs qualify to receive payments. (See specific instructions.) | | |

For Paperwork Reduction Act Notice, see page 1 of the instructions to Form 990 (or Form 990EZ). Cat. No. 11285F Schedule A (Form 990) 1991

Exhibit 28

2/2/92 1,193

Schedule A (Form 990) 1991 Abraham Lincoln Opportunity Foundation 74-2358885 Page 2

Part IV Reason for Non-Private Foundation Status (See instructions for definitions.)

The organization is not a private foundation because it is (please check only ONE applicable box):

- 5 ☐ A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i). ALOF 0066
- 6 ☐ A school. Section 170(b)(1)(A)(ii). (Also complete Part V, page 3.)
- 7 ☐ A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8 ☐ A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(iv).
- 9 ☐ A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter name, city, and state of hospital ▶
- 10 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete Support Schedule.)
- 11a ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete Support Schedule.)
- 11b ☐ A community trust. Section 170(b)(1)(A)(vi). (Also complete Support Schedule.)
- 12 ☐ An organization that normally receives: (a) no more than 1/3 of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975, and (b) more than 1/3 of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions—subject to certain exceptions. See section 509(a)(2). (Also complete Support Schedule.)
- 13 ☐ An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in: (1) boxes 5 through 12 above; or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). See section 509(a)(3).

Provide the following information about the supported organizations. (See instructions for Part IV, box 13.)

| (a) Name(s) of supported organization(s) | (b) Box number from above |
|--|---------------------------|
| | |
| | |

14 ☐ An organization organized and operated to test for public safety. Section 509(a)(4). (See specific instructions.)

Support Schedule (Complete only if you checked box 10, 11, or 12 above.) Use cash method of accounting.

| Calendar year (or fiscal year beginning in) ▶ | (a) 1990 | (b) 1989 | (c) 1988 | (d) 1987 | (e) Total |
|---|-------------|-------------|-------------|-------------|--------------|
| 15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.) | 97,750 | —0— | 13,630 | 8,032 | 119,412 |
| 16 Membership fees received | | | | | |
| 17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is not a business unrelated to the organization's charitable, etc., purpose | 160 | | | | 160 |
| 18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975 | 384 | 57 | 12 | —0— | 453 |
| 19 Net income from unrelated business activities not included in line 18 | | | | | |
| 20 Tax revenues levied for your benefit and either paid to you or expended on your behalf | | | | | |
| 21 The value of services or facilities furnished to you by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge | | | | | |
| 22 Other income. Attach schedule. Do not include gain or (loss) from sale of capital assets | | | | | |
| 23 Total of lines 15 through 22 | 98,294 | 57 | 13,642 | 8,032 | 120,025 |
| 24 Line 23 minus line 17 | 98,134 | 57 | 13,642 | 8,032 | 119,865 |
| 25 Enter 1% of line 23 | 983 | 1 | 136 | 80 | |
| 26 Organizations described in box 10 or 11: | | | | | |
| a Enter 2% of amount in column (e), line 24 | | | | | 2,397 |
| b Attach a list (not open to public inspection) showing the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1987 through 1990 exceeded the amount shown in line 26a. Enter the sum of all excess amounts here ▶ | | | | | 99,395 |

(Continued on page 3)

Part IV Support Schedule (continued) (Complete only if you checked box 10, 11, or 12 on page 2.) N/A**27** Organizations described in box 12, page 2:

- a Attach a list for amounts shown on lines 15, 16, and 17, showing the name of, and total amounts received in each year from, each "disqualified person," and enter the sum of such amounts for each year:

(1990) (1989) (1988) (1987) ALOF 0067

- b Attach a list showing, for 1987 through 1990, the name and amount included in line 17 for each person (other than "disqualified persons") from whom the organization received more during that year than the larger of: (1) the amount on line 25 for the year; or (2) \$5,000. Include organizations described in boxes 5 through 11 as well as individuals. Enter the sum of these excess amounts for each year:

(1990) (1989) (1988) (1987)

28 For an organization described in box 10, 11, or 12, page 2, that received any unusual grants during 1987 through 1990, attach a list (not open to public inspection) for each year showing the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not include these grants in line 15 above. (See specific instructions.)**Part V** Private School Questionnaire

(To be completed ONLY by schools that checked box 6 in Part IV) N/A

| | Yes | No |
|--|-----|----|
| 29 Do you have a racially nondiscriminatory policy toward students by statement in your charter, bylaws, other governing instrument, or in a resolution of your governing body? | | |
| 30 Do you include a statement of your racially nondiscriminatory policy toward students in all your brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? | | |
| 31 Have you publicized your racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if you have no solicitation program, in a way that makes the policy known to all parts of the general community you serve? If "Yes," please describe: If "No," please explain. (If you need more space, attach a separate statement.) | | |
| 32 Do you maintain the following: | | |
| a Records indicating the racial composition of the student body, faculty, and administrative staff? | | |
| b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? | | |
| c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? | | |
| d Copies of all material used by you or on your behalf to solicit contributions? If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.) | | |
| 33 Do you discriminate by race in any way with respect to: | | |
| a Students' rights or privileges? | | |
| b Admissions policies? | | |
| c Employment of faculty or administrative staff? | | |
| d Scholarships or other financial assistance? (See instructions.) | | |
| e Educational policies? | | |
| f Use of facilities? | | |
| g Athletic programs? | | |
| h Other extracurricular activities? If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.) | | |
| 34a Do you receive any financial aid or assistance from a governmental agency? | | |
| b Has your right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached separate statement. | | |
| 35 Do you certify that you have complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation. (See instructions for Part V.) | | |

Exhibit 28

Schedule A (Form 990) 1991 Abraham Lincoln Opportunity Foundation 11-000000 Page 4

Part VI-A Lobbying Expenditures by Electing Public Charities (see instructions)
(To be completed ONLY by an eligible organization that filed Form 5768) N/AALOF
0068Check here ☐ a ☐ If the organization belongs to an affiliated group (see instructions).
Check here ☐ b ☐ If you checked a and "limited control" provisions apply (see instructions).

| Limits on Lobbying Expenses | | (a) Affiliated group totals | (b) To be completed for ALL electing organizations |
|-----------------------------|---|-----------------------------------|---|
| 36 | Total (grassroots) lobbying expenses to influence public opinion | 36 | |
| 37 | Total lobbying expenses to influence a legislative body | 37 | |
| 38 | Total lobbying expenses (add lines 36 and 37) | 38 | |
| 39 | Other exempt purpose expenses (see Part VI instructions) | 39 | |
| 40 | Total exempt purpose expenses (add lines 38 and 39) (see instructions) | 40 | |
| 41 | Lobbying nontaxable amount. Enter the smaller of \$1,000,000 or the amount determined under the following table— If the amount on line 40 is— The lobbying nontaxable amount is— Not over \$500,000 20% of the amount on line 40 Over \$500,000 but not over \$1,000,000 . . . \$100,000 plus 15% of the excess over \$500,000 Over \$1,000,000 but not over \$1,500,000 . . \$175,000 plus 10% of the excess over \$1,000,000 Over \$1,500,000 \$225,000 plus 5% of the excess over \$1,500,000 | 41 | |
| 42 | Grassroots nontaxable amount (enter 25% of line 41) (Complete lines 43 and 44. File Form 4720 if either line 36 exceeds line 42 or line 38 exceeds line 41.) | 42 | |
| 43 | Excess of line 36 over line 42 | 43 | |
| 44 | Excess of line 38 over line 41 | 44 | |

4-Year Averaging Period Under Section 501(h)(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.
See the instructions for lines 45–50 for details.)

| Calendar year (or fiscal year beginning in) ▶ | Lobbying Expenses During 4-Year Averaging Period | | | | |
|--|--|-------------|-------------|-------------|--------------|
| | (a) 1991 | (b) 1990 | (c) 1989 | (d) 1988 | (e) Total |
| 45 Lobbying nontaxable amount (see instructions) | | | | | |
| 46 Lobbying ceiling amount (150% of line 45(e)) | | | | | |
| 47 Total lobbying expenses (see instructions) | | | | | |
| 48 Grassroots nontaxable amount (see instructions) | | | | | |
| 49 Grassroots ceiling amount (150% of line 48(e)) | | | | | |
| 50 Grassroots lobbying expenses (see instructions) | | | | | |

Part VI-B Lobbying Activity by Nonelecting Public Charities
(For optional reporting by organizations that did not complete Part VI-A.)

| During the year, did you attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: | | Yes | No | Amount |
|--|--|-----|----|--------|
| a | Volunteers | | | |
| b | Paid staff or management (include compensation in expenses reported on lines c through h) | | | |
| c | Media advertisements | | | |
| d | Mailings to members, legislators, or the public | | | |
| e | Publications or published or broadcast statements | | | |
| f | Grants to other organizations for lobbying purposes | | | |
| g | Direct contact with legislators, their staffs, government officials, or a legislative body | | | |
| h | Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means | | | |
| | Total lobbying expenses (add lines c through h) | | | |

If "Yes" to any of the above, also attach a statement giving a detailed description of the activities.

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

| | | Yes | No |
|---|--|---------|----|
| a | Transfers from the reporting organization to a noncharitable exempt organization of: | | |
| | (i) Cash | \$1a(i) | X |
| | (ii) Other assets | a(ii) | X |
| b | Other Transactions: | | |
| | (i) Sales of assets to a noncharitable exempt organization | b(i) | X |
| | (ii) Purchases of assets from a noncharitable exempt organization | b(ii) | X |
| | (iii) Rental of facilities or equipment | b(iii) | X |
| | (iv) Reimbursement arrangements | b(iv) | X |
| | (v) Loans or loan guarantees | b(v) | X |
| | (vi) Performance of services or membership or fundraising solicitations | b(vi) | X |
| c | Selling of facilities, equipment, mailing lists or other assets, or paid employees | c | X |

d If the answer to any of the above is "Yes," complete the following schedule. The "Amount involved" column below should always indicate the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, indicate in column (d) the value of the goods, other assets, or services received.

[illegible]

52a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

b If "Yes," complete the following schedule.

[illegible]

Line 26(b) - Contributors Whose Gifts for 1987 through 1990 Exceeded the
Amount Shown on Line 26a - \$2,397:

| | | | |
|-------------------------------|----------|-----------|------------|
| Family Channel | 6/28/90 | \$ 22,250 | |
| | 10/25/90 | 25,500 | |
| | | ----- | \$ 47,750 |
| Howard H. Callaway Foundation | 2/9/87 | \$ 5,000 | |
| | 2/24/88 | 3,548 | |
| | 5/27/88 | 3,082 | |
| | 9/20/90 | 5,000 | |
| | 11/1/90 | 20,000 | |
| | | ----- | 36,630 |
| Bruce & Mary Benson | 2/24/88 | \$ 7,000 | |
| | 8/23/90 | 10,000 | |
| | | ----- | 17,000 |
| Amilore Foundation | 9/6/90 | | 5,000 |
| RJR Nabisco, Inc. | 10/17/90 | | 5,000 |
| | | | ----- |
| | | | \$ 111,380 |
| | | | ***** |

Exhibit 28

Short Form
Return of Organization Exempt From Income Tax

Under section 501(c) of the Internal Revenue Code (except black lung benefit trust or private foundation) or section 4947(a)(1) charitable trust
For organizations with gross receipts less than \$100,000 and total assets less than \$250,000 at the end of the year.
The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No. 1545-1150
1992
This Form is Open to Public Inspection

Form **990EZ**

Department of the Treasury
Internal Revenue Service

For the calendar year 1992, or fiscal year beginning 1992, and ending 19

Please use IRS form or print or type. See Separate instructions.

B Name of organization
ABRAHAM LINCOLN OPPORTUNITY FOUNDATION

C Employer identification number
74-2358885

D State registration number

E Enter four-digit group exemption number (GEN)

F Check type of organization—Exempt under section 501(c)(3) insert number, OR section 4947(a)(1) charitable trust

G Check ☐ if exemption application pending

H Check ☒ if address changed

I Accounting method ☒ Cash ☐ Accrual ☐ Other (specify)

J Check ☐ if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS, but if the organization receives a Form 990 package in the mail, the organization should file a return without financial data. Some states require a complete return.

K Enter the organization's 1992 gross receipts (add back lines 5a, 6b, and 7b, to line 9) \$ 80,211
If \$100,000 or more, the organization must file Form 990 instead of Form 990EZ.

Part I Statement of Revenue, Expenses, and Changes in Net Assets or Fund Balances

| | | | | |
|------------|---|--|--------|---------|
| Revenue | 1 | Contributions, gifts, grants, and similar amounts received (attach schedule—see instructions) | 1 | 80,000 |
| | 2 | Program service revenue | 2 | |
| | 3 | Membership dues and assessments (see instructions) | 3 | |
| | 4 | Investment income | 4 | 211 |
| | 5a | Gross amount from sale of assets other than inventory | 5a | |
| | 5b | Less: cost or other basis and sales expenses | 5b | |
| | 5c | Gain or (loss) (line 5a less line 5b) (attach schedule) | 5c | |
| | 6 | Special events and activities (attach schedule—see instructions) | 6 | |
| | 6a | Gross revenue (not including 5 of contributions reported on line 1) | 6a | |
| Expenses | 6b | Less: direct expenses | 6b | |
| | 6c | Net income or (loss) (line 6a less line 6b) | 6c | |
| | 7a | Gross sales less returns and allowances | 7a | |
| Net Assets | 7b | Less: cost of goods sold | 7b | |
| | 7c | Gross profit or (loss) (line 7a less line 7b) | 7c | |
| | 8 | Other revenue (describe) | 8 | |
| 9 | Total revenue (add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8) | 9 | 80,211 | |
| Expenses | 10 | Grants and similar amounts paid (attach schedule) | 10 | |
| | 11 | Benefits paid to or for members | 11 | |
| | 12 | Salaries, other compensation, and employee benefits | 12 | |
| | 13 | Professional fees and other payments to independent contractors | 13 | |
| | 14 | Occupancy, rent, utilities, and maintenance | 14 | |
| | 15 | Printing, publications, postage, and shipping | 15 | |
| | 16 | Other expenses (describe) <u>SCH. II</u> | 16 | 70,007 |
| 17 | Total expenses (add lines 10 through 16) | 17 | 70,007 | |
| Net Assets | 18 | Excess or (deficit) for the year (line 9 less line 17) | 18 | 10,204 |
| | 19 | Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) | 19 | (27360) |
| | 20 | Other changes in net assets or fund balances (attach explanation) | 20 | |
| | 21 | Net assets or fund balances at end of year (combine lines 18 through 20) (must agree with line 27, column (B)) | 21 | (17156) |

Part II Balance Sheets—If total assets on line 25, column (B) are \$250,000 or more, Form 990 must be filed instead of Form 990EZ.

| | (A) Beginning of year | (B) End of year |
|---|-----------------------|-----------------|
| Cash, savings, and investments | 1118 | 7287 |
| Land and buildings | | |
| 24 Other assets (describe) <u>OVERPAID PAYROLL TAXES RECEIVABLE</u> | | 4035 |
| 25 Total assets | 1118 | 11322 |
| 26 Total liabilities (describe) <u>SCH. III</u> | 28478 | 35478 |
| 27 Net assets or fund balances (column (B) must agree with line 21) | (27360) | (17156) |

For Paperwork Reduction Act Notice, see page 1 of the separate instructions.

Cal. No. 10942
Exhibit 2R
Form 990EZ (1992)

ALOF
0072

Form 990EZ (1992) 74-235885

Part III Statement of Program Service Accomplishments—(see instructions)

Describe what was achieved in carrying out the organization's exempt purposes. Fully describe the services provided, the number of persons benefited, or other relevant information for each program title.

28 PRODUCTION OF TV PROGRAMS WITH VIEW FOR CITIZEN PARTICIPATION
IN COMMUNITY PROBLEMS (Grants \$) 70000

29 (Grants \$)

30 (Grants \$)

31 Other program services (attach schedule) (Grants \$)

32 Total program service expenses (add lines 28 through 31) 70000

Part IV List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated. See instructions.)

| (A) Name and address | (B) Title and average hours per week devoted to position | (C) Compensation (If not paid, enter "0") | (D) Contributions to employees (If not paid, enter "0") | (E) Expense account and other benefits |
|------------------------------|--|---|---|--|
| HOWARD CALLAWAY DENVER CO | CHAIRMAN 20 HRS/WK | 0 | 0 | 0 |
| KAY KIDDLE DENVER CO | SECRETARY/TREAS. 20 HRS/WK | 0 | 0 | 0 |

Part V Other Information—Section 501(c)(3) organizations and section 4947(a)(1) charitable trusts must also complete and attach Schedule A (Form 990). (See General Instruction D1.)

33 Did the organization engage in any activity not previously reported to the Internal Revenue Service? ☐ Yes ☒ No

34 Were any changes made to the organizing or governing documents but not reported to the IRS? ☐ Yes ☒ No

35 If the organization had income from business activities, such as those reported on lines 2, 6, and 7 (among others), but NOT reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T.

a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return? ☐ Yes ☒ No

b If "Yes," has it filed a tax return on Form 990-T, Exempt Organization Business Income Tax Return, for this year?

36 Was there a liquidation, dissolution, termination, or substantial contraction during the year? (See instructions.) ☐ Yes ☒ No

If "Yes," attach a statement as described in the instructions.

37a Enter amount of political expenditures, direct or indirect, as described in the instructions. 37a1 NONE

b Did the organization file Form 1120-POL, U.S. Income Tax Return for Certain Political Organizations, for this year? ☐ Yes ☒ No

38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee, OR were any such loans made in a prior year and still unpaid at the start of the period covered by this return? ☐ Yes ☒ No

b If "Yes," attach the schedule specified in the instructions and enter the amount involved 38b1 N/A

39 Section 501(c)(7) organizations.—Enter:

a Initiation fees and capital contributions included on line 9 39a1 N/A

b Gross receipts, included on line 9, for public use of club facilities (see instructions). 39b1 N/A

c Does the club's governing instrument or any written policy statement provide for discrimination against any person because of race, color, or religion? (If "Yes," attach statement; see instructions.) ☐ Yes ☒ No

40 List the states with which a copy of this return is filed. 40 THE FOUNDATION

41 The books are in care of 41 THE FOUNDATION Telephone no. 41 (303) 844-05
Located at 41 1500 GRANT ST - 850 DENVER CO ZIP code 41 80202

42 Section 4947(a)(1) charitable trusts filing Form 990EZ in lieu of Form 1041, U.S. Fiduciary Income Tax Return.—Check here ☐ and enter the amount of tax-exempt interest received or accrued during the tax year 42 42

Please Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Signature of officer _____ Date _____ Title **Exhibit 2B**

Paid Preparer's signature **ALS** Date **11/12/93** Check if self-employed ☐

Preparer's Use Only Firm's name (or yours if self-employed) **NEWBELL & CO. P.C.** ZIP code **80222**

SCHEDULE A
(Form 990)

 Department of the Treasury
 Internal Revenue Service

Organization Exempt Under Section 501(c)(3)
 (Except Private Foundation, 501(c)(3), 501(c)(4), or Section 4947(a)(1) Charitable Trust
 Supplementary Information

Attach to Form 990 (or Form 990EZ).

 ALOF
 0073

OMB No. 1545-0047

1992

 Name ABRAHAM LINCOLN OPPORTUNITY FOUNDATION Employer identification number 74-2358885
Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
 (See specific instructions.) (List each one. If there are none, enter "None.")

| (a) Name and address of employees paid more than \$30,000 | (b) Title and average hours per week devoted to position | (c) Compensation | (d) Contributions to employee benefit plans | (e) Expense account and other allowances |
|---|--|------------------|---|--|
| NONE | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

 Total number of other employees paid over \$30,000 0
Part II Compensation of the Five Highest Paid Persons for Professional Services
 (See specific instructions.) (List each one. If there are none, enter "None.")

| (a) Name and address of persons paid more than \$30,000 | (b) Type of service | (c) Compensation |
|---|---------------------|------------------|
| NONE | | |
| | | |
| | | |
| | | |
| | | |

 Total number of others receiving over \$30,000 for professional services 0
Part III Statements About Activities

Yes No

- During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum?
 If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities. \$ N/A
 Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.
- During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any of its trustees, directors, principal officers, or creators, or with any taxable organization or corporation with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary:
 - Sale, exchange, or leasing of property?
 - Lending of money or other extension of credit?
 - Furnishing of goods, services, or facilities?
 - Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?
 - Transfer of any part of its income or assets?
 If the answer to any question is "Yes," attach a detailed statement explaining the transactions.
- Does the organization make grants for scholarships, fellowships, student loans, etc.?
- Attach a statement explaining how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs qualify to receive payments. (See specific instructions.)

| | |
|----|---|
| 1 | ✓ |
| 2a | ✓ |
| 2b | ✓ |
| 2c | ✓ |
| 2d | ✓ |
| 2e | ✓ |
| 3 | ✓ |

For Paperwork Reduction Act Notice, see page 1 of the instructions to Form 990 (or Form 990EZ).

Cat. No. 11285F Schedule A (Form 990) 1992

Exhibit 28

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6674

74-2356625

Page 2

Part IV Reason for Non-Private Foundation Status (See instructions for definitions.)

The organization is not a private foundation because it is (please check only ONE applicable box):

5 ☐ A church, convention of churches, or association of churches. Section 170(c)(1)(A)(i).

6 ☐ A school. Section 170(c)(1)(A)(ii). (Also complete Part V, page 3.)

7 ☐ A hospital or a cooperative hospital service organization. Section 170(c)(1)(A)(iii).

8 ☐ A Federal, State, or local government or governmental unit. Section 170(c)(1)(A)(iv).

9 ☐ A medical research organization operated in conjunction with a hospital. Section 170(c)(1)(A)(v). Enter name, city, and state of hospital: _____

10 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(c)(1)(A)(vi). (Also complete Support Schedule.)

11a ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(c)(1)(A)(vii). (Also complete Support Schedule.)

11b ☐ A community trust. Section 170(c)(1)(A)(viii). (Also complete Support Schedule.)

12 ☐ An organization that normally receives: (a) no more than 10% of its support from gross investment income and unrelated business income (less section 511 tax) from businesses acquired by the organization after June 30, 1975, and (b) more than 10% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions—subject to certain exceptions. See section 509(a)(2). (Also complete Support Schedule.)

13 ☐ An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in: (i) boxes 5 through 12 above, or (ii) section 509(c)(4), (5), or (6), if they meet the test of section 509(a)(2). (See section 509(a)(2).)

Provide the following information about the supported organizations. (See instructions for Part IV, box 13.)

| (a) Name(s) of supported organization(s) | (b) Box number from above |
|--|---------------------------|
| | |
| | |
| | |

14 ☐ An organization organized and operated to test for public safety. Section 509(a)(4). (See specific instructions.)

Support Schedule (Complete only if you checked box 10, 11, or 12 above.) (Use cash method of accounting.)

| Calendar year (or fiscal year beginning on): | 1991 | 1990 | 1989 | 1988 | 1987 |
|---|---------|---------|------|--------|---------|
| 15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.) | 499,500 | 477,500 | 57 | 13,630 | 160,330 |
| 16 Membership fees received | | | | | |
| 17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is not a business unrelated to the organization's charitable, etc., purpose | | 160 | | | 160 |
| 18 Gross income from interest, dividends, amounts received from payments on securities (less section 512(a)(2)), rents, royalties, and unrelated business taxable income (less section 511 taxes from businesses acquired by the organization after June 30, 1975). | 108 | 384 | 57 | 12 | 561 |
| 19 Net income from unrelated business activities not included in line 18 | | | | | |
| 20 Tax revenues owed for the organization's benefit and either paid to it or expended on its behalf | | | | | |
| 21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities furnished to the public without charge. | | | | | |
| 22 Other income. Attach schedule. Do not include gain or loss from sale of capital assets. | | | | | |
| 23 Total of lines 15 through 22 | 440,558 | 482,944 | 57 | 13,642 | 161,051 |
| 24 Line 23 minus line 17 | 440,558 | 482,944 | 57 | 13,642 | 161,051 |
| 25 Enter 1% of line 23 | 4,406 | 4,829 | 6 | 136 | 1,611 |
| 26 Organizations described in box 10 or 11: | | | | | |
| a Enter 2% of amount in column (a), line 24 | | | | | |
| b Attach a list (not open to public inspection) showing the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1988 through 1991 exceeded the amount shown in line 26a. Enter the sum of all excess amounts here | | | | | |
| 27 | | | | | |

3218

134,072

(Continued on page 3)

Part IV Support Schedule (continued) (Complete only if you checked box 10, 11, or 12 on page 2.)

- 27 Organizations described in box 12, page 2:
- a Attach a list for amounts shown on lines 15, 16, and 17, showing the name of, and total amounts received in each year from, each "disqualified person," and enter the sum of such amounts for each year:
- (1991) N/A (1990) (1989) (1988)
- b Attach a list showing, for 1988 through 1991, the name of, and amount included in line 17 for, each person (other than a "disqualified person") from whom the organization received more during that year than the larger of: (1) the amount on line 25 for the year or (2) \$5,000. Include organizations described in boxes 5 through 11 as well as individuals. Enter the sum of these excess amounts for each year:
- (1991) N/A (1990) (1989) (1988)
- 28 For an organization described in box 10, 11, or 12, page 2, that received any unusual grants during 1988 through 1991, attach a list (not open to public inspection) for each year showing the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not include these grants in line 15. (See specific instructions.) NONE

Part V Private School Questionnaire(To be completed ONLY by schools that checked box 6 in Part IV) N/A

| | Yes | No |
|---|-----|----|
| 29 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? | | |
| 30 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? | | |
| 31 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe: If "No," please explain. (If you need more space, attach a separate statement.) | | |
| 32 Does the organization maintain the following: | | |
| a Records indicating the racial composition of the student body, faculty, and administrative staff? | | |
| b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? | | |
| c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? | | |
| d Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.) | | |
| 33 Does the organization discriminate by race in any way with respect to: | | |
| a Students' rights or privileges? | | |
| b Admissions policies? | | |
| c Employment of faculty or administrative staff? | | |
| d Scholarships or other financial assistance? (See instructions.) | | |
| e Educational policies? | | |
| f Use of facilities? | | |
| g Athletic programs? | | |
| h Other extracurricular activities? If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.) | | |
| 34a Does the organization receive any financial aid or assistance from a governmental agency? | | |
| b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement. | | |
| 35 Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587 governing racial nondiscrimination? If "No," attach an explanation (See instructions for Part V.) | | |

Exhibit 28

ALOF
0076Schedule A (Form 990) 1992 74-2358885 Page 4**Part VI-A** Lobbying Expenditures by Electing Public Charities (see instructions)
(To be completed ONLY by an eligible organization that filed Form 5768)

N/A

Check here ☐ a ☐ If the organization belongs to an affiliated group (see instructions).Check here ☐ b ☐ If you checked a and "limited control" provisions apply (see instructions).**Limits on Lobbying Expenditures**

("Expenditures" means amounts paid or incurred)

| | (a) Affiliated group totals | (b) To be completed for ALL electing organizations |
|---|-----------------------------------|---|
| 36 Total lobbying expenditures to influence public opinion (grassroots lobbying) | 36 | |
| 37 Total lobbying expenditures to influence a legislative body (direct lobbying) | 37 | |
| 38 Total lobbying expenditures (add lines 36 and 37) | 38 | |
| 39 Other exempt purpose expenditures (see Part VI-A instructions) | 39 | |
| 40 Total exempt purpose expenditures (add lines 38 and 39) (see instructions) | 40 | |
| 41 Lobbying nontaxable amount. Enter the amount from the following table— | | |
| If the amount on line 40 is— The lobbying nontaxable amount is— | | |
| Not over \$500,000 20% of the amount on line 40 | | |
| Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000 | | |
| Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000 | | |
| Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000 | | |
| Over \$17,000,000 \$1,000,000 | | |
| 42 Grassroots nontaxable amount (enter 25% of line 41) | 42 | |
| 43 Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36 | 43 | |
| 44 Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38 | 44 | |

Caution: File Form 4720 if there is an amount on either line 43 or line 44.

4-Year Averaging Period Under Section 501(h)(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.
See the instructions for lines 45–50 for details.)

| Calendar year (or fiscal year beginning in) ▶ | Lobbying Expenditures During 4-Year Averaging Period | | | | |
|--|--|-------------|-------------|-------------|--------------|
| | (a) 1992 | (b) 1991 | (c) 1990 | (d) 1989 | (e) Total |
| 45 Lobbying nontaxable amount (see instructions) | | | | | |
| 46 Lobbying ceiling amount (150% of line 45(e)) | | | | | |
| 47 Total lobbying expenditures (see instructions) | | | | | |
| 48 Grassroots nontaxable amount (see instructions) | | | | | |
| 49 Grassroots ceiling amount (150% of line 48(e)) | | | | | |
| 50 Grassroots lobbying expenditures (see instructions) | | | | | |

Part VI-B Lobbying Activity by Nonelecting Public Charities
(For reporting by organizations that did not complete Part VI-A.)

N/A

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:

| | Yes | No | Amount |
|--|-----|----|--------|
| a Volunteers | | | |
| b Paid staff or management (include compensation in expenses reported on lines c through h) | | | |
| c Media advertisements | | | |
| d Mailings to members, legislators, or the public | | | |
| e Publications or published or broadcast statements | | | |
| f Grants to other organizations for lobbying purposes | | | |
| g Direct contact with legislators, their staffs, government officials, or a legislative body | | | |
| h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means | | | |
| i Total lobbying expenditures (add lines c through h) | | | |

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

Exhibit 28

ALOF
0078ABRAHAM LINCOLN OPPORTUNITY FOUNDATION, INC.
74-2358885
1992 FORM 990EZ

SCHEDULE I

PART I - LINE 1 - CONTRIBUTORS WHOSE CONTRIBUTIONS FOR
1992 ARE \$5,000 OR MORE

| | | |
|--------------------------|----------|---------------|
| HOWARD H. CALLAWAY | 1/17/92 | 15,000 |
| FOUNDATION, INC. | 2/10/92 | 10,000 |
| P.O. BOX 1510 | 3/30/92 | 20,000 |
| COLUMBUS, GA 31904 | | |
| R. RICHARDSON TRUST | | |
| 983 PARK AVE. - #14A | 4/24/92 | 25,000 |
| NEW YORK, NY 10028 | | |
| HENDERSON FOUNDATION | | |
| 1608 W. MAIN ST. | 12/28/92 | 10,000 |
| MARSHALLTOWN, IOWA 50158 | | |
| | | <u>80,000</u> |

SCHEDULE II

PART I - LINE 16 - OTHER EXPENSES

| | |
|------------------|---------------|
| PRODUCTION COSTS | 70,000 |
| BANK CHARGES | 7 |
| | <u>70,007</u> |

SCHEDULE III

PART II - LINE 26 - TOTAL LIABILITIES

| | BEGINNING OF YEAR | END OF YEAR |
|-----------------------|-------------------------|-------------------|
| LOAN PAYABLE | 27,747 | 27,747 |
| PAYROLL TAXES PAYABLE | 731 | 731 |
| | <u>28,478</u> | <u>28,478</u> |

Exhibit 28

ALOF
0078

ABRAHAM LINCOLN OPPORTUNITY FOUNDATION, INC.
74-2358885
1992 FORM 990EZ
SCHEDULE A (FORM 990)

SCHEDULE IV

PART IV - LINE 26b - CONTRIBUTORS WHOSE GIFTS FOR 1988 THROUGH
1991 EXCEEDED THE AMOUNT SHOWN ON
LINE 26b - \$3,218

| | | | |
|--------------------------------------|----------|--------|----------------|
| FAMILY CHANNEL | 6/28/90 | 22,250 | |
| | 10/25/90 | 25,500 | 47,750 |
| HOWARD H. CALLAWAY FOUNDATION | 2/24/88 | 3,548 | |
| | 5/27/88 | 3,082 | |
| | 9/20/90 | 5,000 | |
| | 11/01/90 | 20,000 | |
| | 8/22/91 | 10,000 | 41,630 |
| BRUCE & MARY BENSON | 2/24/88 | 7,000 | |
| | 8/23/90 | 10,000 | 17,000 |
| AMILORE FOUNDATION | 9/06/90 | | 5,000 |
| RJR NABISCO, INC. | 10/17/90 | | 5,000 |
| CITIZENS AGAINST GOVERNMENT WASTE | 8/02/91 | | 37,000 |
| | | | <u>153,380</u> |

Exhibit 28

| | | |
|---|--|--|
| Form 2758 (Rev. August 1992) Department of the Treasury Internal Revenue Service | Application for Extension of Time To File Certain Excise, Income, Information, and Other Returns ▶ File a separate application for each return. | ALOF 0060 OMB No. 1545-0148 Expires 5-31-95 |
| See type or xt. File the original and one copy by the due date for filing your return. (See instructions on back.) | Name <u>ABRAHAM LINCOLN OPPORTUNITY FOUNDATION</u> Number and street, for P.O. box no. if mail is not delivered to street address. <u>1900 GRANT STREET</u> City, town or post office, state, and ZIP code. (For a foreign address, see instructions.) <u>DENVER CO 80203</u> | Employer identification number <u>74-2358885</u> Apt. or suite no. <u>850</u> |
| Note: Taxpayers who file a corporation income tax return, including Forms 990-C, 990-T, and 1120S, must use Form 7004 to request an extension of time to file. Partnerships, REMICs, and trusts (except those filing Form 990-T) must use Form 8736 to request an extension of time to file. | | |
| 1 An extension of time until <u>OCTOBER 15</u> , 19 <u>93</u> , is requested to file (check only one): <input type="checkbox"/> Form 706GS(D) <input type="checkbox"/> Form 990-PF <input type="checkbox"/> Form 1041-A <input type="checkbox"/> Form 3520-A <input type="checkbox"/> Form 8612 <input type="checkbox"/> Form 706GS(T) <input type="checkbox"/> Form 990-T (401(a) or 408(a) trust) <input type="checkbox"/> Form 1042 <input type="checkbox"/> Form 4720 <input type="checkbox"/> Form 8613 <input checked="" type="checkbox"/> Form 990 or 990EZ <input type="checkbox"/> Form 990-T (trust other than above) <input type="checkbox"/> Form 1042S <input type="checkbox"/> Form 3227 <input type="checkbox"/> Form 8725 <input type="checkbox"/> Form 990-BL <input type="checkbox"/> Form 1041 (estate) (see instructions) <input type="checkbox"/> Form 1120-ND (4951 taxes) <input type="checkbox"/> Form 6069 <input type="checkbox"/> Form 8804 If the organization does not have an office or place of business in the United States, check this box. <input type="checkbox"/> | | |
| 2a For calendar year 19 <u>92</u> , or other tax year beginning and ending b If this tax year is for less than 12 months, check reason: <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Change in accounting period | | |
| 3 Has an extension of time to file been previously granted for this tax year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | |
| 4 State in detail why you need the extension. <u>TAXPAYER HAS CHANGED ACCOUNTANTS AND MOVED ITS OFFICES TO DENVER. ADDITIONAL TIME IS NEEDED TO COMPILE THE INFORMATION TO FILE A COMPLETE AND ACCURATE RETURN</u> | | |
| 5a If this form is for Form 706GS(D), 706GS(T), 990-BL, 990-PF, 990-T, 1041 (estate), 1042, 1120-ND, 4720, 6069, 8612, 8613, 8725, or 8804, enter the tentative tax, less any nonrefundable credits. (See instructions.) \$ _____ b If this form is for Form 990-PF, 990-T, 1041 (estate), 1042, or 8804, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. \$ _____ c Balance due (subtract line 5b from line 5a). Include your payment with this form, or deposit with FTD coupon if required. (See instructions.) \$ _____ | | |
| Signature and Verification Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete; and that I am authorized to prepare this form. | | |
| Signature ▶ <u>W. L. Newbill</u> Title ▶ <u>C.P.A.</u> Date ▶ <u>8/12/93</u> FILE ORIGINAL AND ONE COPY. The IRS will show below whether or not your application is approved and will return the copy. | | |
| Notice to Applicant—To Be Completed by the IRS <input checked="" type="checkbox"/> We HAVE approved your application. Please attach this form to your return. <input type="checkbox"/> We HAVE NOT approved your application. However, we have granted a 10-day grace period from the later of the date shown below or the due date of your return (including any prior extensions). This grace period is considered to be a valid extension of time for elections otherwise required to be made on a timely return. Please attach this form to your return. <input type="checkbox"/> We HAVE NOT approved your application. After considering the reasons stated in item 4, we cannot grant your request for an extension of time to file. We are not granting the 10-day grace period. <input type="checkbox"/> We cannot consider your application because it was filed after the due date of the return for which an extension was requested. <input checked="" type="checkbox"/> Other: <u>40 days per mt</u> | | |
| By: <u>Charles G. ...</u> Director | | Date <u>082793</u> |
| RECEIVED AUG 16 1993 AUSTIN, TEXAS | | |
| If you want a copy of this form to be returned to an address other than that shown above, please enter the address to which the copy should be sent. | | |
| Please Type or Print | Name <u>NEWBILL & Co., P.C.</u> Number and street, for P.O. box no. if mail is not delivered to street address. <u>950 WANSWORTH BLVD - #306</u> City, town or post office, state, and ZIP code. (For a foreign address, see instructions.) <u>LAKELAND, CO 80215</u> | |
| | | Apt. or suite no. <u>Exhibit 28</u> |
| For Paperwork Reduction Act Notice, see back of form. | | |

Form **2758**
Rev. August 1992
Department of the Treasury
Internal Revenue Service

Application for Extension of Time to File

Certain Excise, Income, Information, and Other Returns

File a separate application for each return.

0081

OMB No. 1545-0148
Expires 5-31-95

| | |
|--|--|
| Name of the person or entity that is the filer of the return. Abraham Lincoln Opportunity Foundation | EIN or other ID number. 74-2358885 |
| Address. 440 First Street, NW Washington, DC 20001 | City, town, or post office, state, and ZIP code. Use a separate address for each return. 400 |

Notes: Taxpayers who file a corporation income tax return, including Forms 990-C, 990-T, and 1120S, must use Form 7004 to request an extension of time to file.

Partnerships, REMICs, and trusts (except those filing Form 990-T) must use Form 2758 to request an extension of time to file.

1. An extension of time until **JULY 15, 1993**, is requested to file (check only one):

| | | | | |
|---|---|---|--------------------------------------|------------------------------------|
| <input type="checkbox"/> Form 706 (Estate) | <input type="checkbox"/> Form 990-EF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 3520-A | <input type="checkbox"/> Form 5312 |
| <input type="checkbox"/> Form 706 (Estate) | <input type="checkbox"/> Form 990-T (1041 or 1042) | <input type="checkbox"/> Form 1042 | <input type="checkbox"/> Form 4720 | <input type="checkbox"/> Form 5313 |
| <input checked="" type="checkbox"/> Form 990 or 990-E | <input type="checkbox"/> Form 990-T (other than 1041 or 1042) | <input type="checkbox"/> Form 1042S | <input type="checkbox"/> Form 5227 | <input type="checkbox"/> Form 5725 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 1041 (other than 1041-A) | <input type="checkbox"/> Form 1120 (1120-S) (other than 1120-S) | <input type="checkbox"/> Form 6063 | <input type="checkbox"/> Form 5304 |

If the organization does not have an office or place of business in the United States, check this box ☐

2a. For calendar year 19 **92**, or other tax year beginning **1992** and ending **1993**

b. If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

3. Has an extension of time to file been previously granted for this tax year? ☐ Yes ☒ No

4. State in detail why you need the extension. **ADDITIONAL TIME IS NEEDED TO GATHER THE INFORMATION NECESSARY TO FILE A COMPLETE AND ACCURATE RETURN**

5a. If this form is for Form 706 (Estate), 706 (Estate), 990-BL, 990-EF, 990-T, 1041 (other than 1041-A), 1042, 1120 (1120-S) (other than 1120-S), 5303, 5312, 5313, 5725, or 5304, enter the tentative tax, less any nonrefundable credits. (See instructions.)

b. If this form is for Form 990-EF, 990-T, 1041 (other than 1041-A), 1042, or 5304, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.

c. Balance due (subtract line 5b from line 5a). Include your payment with this form, or deposit with FTD (unless if required. (See instructions.)

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete; and that I am authorized to prepare this form.

Signature: **ACGIL** Date: **4/21/93**

FILE ORIGINAL AND ONE COPY. The IRS will show below whether your application is approved and will return the copy.

Notice to Applicant - To Be Completed by the IRS

☒ We HAVE approved your application. Please attach this form to your return.

☐ We HAVE NOT approved your application. However, we have granted a 10-day grace period from the date shown below or the due date of your return (whichever is later). This grace period is considered to be a valid extension of time for elections otherwise required to be made on a timely return. Please attach this form to your return.

☐ We HAVE NOT approved your application. After considering the reasons stated in item 4, we cannot grant your request for an extension of time to file. We are not granting the 10-day grace period.

☐ We cannot consider your application because it was filed after the due date of the return for which an extension was requested.

If you want a copy of this form to be returned to an address other than that shown above, please enter the address in the space below.

Name: **GILBERT & WOLFAND, P.C.**

Please Type or Print: **2201 WISCONSIN AVENUE, NW, SUITE 320**

City, town, or post office, state, and ZIP code: **WASHINGTON, DC 20007**

For Paperwork Reduction Act Notice, see the next page.

Form 2758 (Rev. 5-92)

Exhibit 28

0082

JAB No. 1545-1150

Form 990-EZ **Short Form**
Return of Organization Exempt From Income Tax
 Under Section 501(c) of the Internal Revenue Code (except black lung benefit trust or private foundation) or section 4947(a)(1) nonexempt charitable trust
 For organizations with gross receipts less than \$100,000 and total assets less than \$250,000 at the end of the year.
 The organization may have to use a copy of this return to satisfy state reporting requirements.

1993
 This Form is Open to Public Inspection

Department of the Treasury
 Internal Revenue Service

A For the 1993 calendar year, OR tax year beginning 1993, and ending 1993.

B Check if:
☐ Initial return
☐ Final return
☐ Amended return
☐ Change of address

C Name of organization
 ABRAHAM LINCOLN OPPORTUNITY FOUNDATION
 Number and street (or P.O. box, if mail is not delivered to street address) Room/suite
 1900 GRANT ST. 850
 City, town or post office, state, and ZIP code
 DENVER CO 80202

D Employer identification number
 74-2358885

E State registration number

F Check ☐ if exemption application is pending

G Accounting method: ☒ Cash ☐ Accrual ☐ Other (specify) _____

H Enter four-digit group exemption number (GEN)

I Type of organization: ☒ Exempt under Section 501(c) 3 4 (insert number) OR ☐ Section 4947(a)(1) nonexempt charitable trust
 Note: Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts MUST attach a completed Schedule A (Form 990).

J Check ☐ if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS, but if the organization received a Form 990 Package in the mail, the organization should file a return without financial data. Some states require a sample return.

K Enter the organization's 1993 gross receipts (add back lines 5b, 6b, and 7b, to line 9) \$ 44968
 If \$100,000 or more, the organization must file Form 990 instead of Form 990-EZ.

Part I Statement of Revenue, Expenses, and Changes in Net Assets or Fund Balances

| | | | |
|----|--|----|---------|
| 1 | Contributions, gifts, grants, and similar amounts received (attach schedule—see instructions) | 1 | 44920 |
| 2 | Program service revenue including government fees and contracts | 2 | |
| 3 | Membership dues and assessments (see instructions) | 3 | |
| 4 | Investment income | 4 | 144 |
| 5a | Gross amount from sale of assets other than inventory | 5a | |
| 5b | Less: cost or other basis and sales expenses | 5b | |
| 5c | Gain or (loss) from sale of assets other than inventory (line 5a less line 5b) (attach schedule) | 5c | |
| 6 | Special events and activities (attach schedule—see instructions): | | |
| 6a | Gross revenue (not including \$ of contributions reported on line 1) | 6a | |
| 6b | Less: direct expenses other than fundraising expenses | 6b | |
| 6c | Net income or (loss) from special events and activities (line 6a less line 6b) | 6c | |
| 7a | Gross sales of inventory, less returns and allowances | 7a | |
| 7b | Less: cost of goods sold | 7b | |
| 7c | Gross profit or (loss) from sales of inventory (line 7a less line 7b) | 7c | |
| 8 | Other revenue (describe) | 8 | |
| 9 | Total revenue (add lines 1, 2, 3, 4, 5c, 6c, 7c, and 8) | 9 | 44968 |
| 10 | Grants and similar amounts paid (attach schedule) | 10 | |
| 11 | Benefits paid to or for members | 11 | |
| 12 | Salaries, other compensation, and employee benefits | 12 | 9584 |
| 13 | Professional fees and other payments to independent contractors | 13 | 520 |
| 14 | Occupancy, rent, utilities, and maintenance | 14 | |
| 15 | Printing, publications, postage, and shipping | 15 | 1819 |
| 16 | Other expenses (describe) SCH. III | 16 | 29083 |
| 17 | Total expenses (add lines 10 through 16) | 17 | 16885 |
| 18 | Excess or (deficit) for the year (line 9 less line 17) | 18 | (17156) |
| 19 | Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) | 19 | (17156) |
| 20 | Other changes in net assets or fund balances (attach explanation) | 20 | |
| 21 | Net assets or fund balances at end of year (combine lines 18 through 20) | 21 | (271) |

Part II Balance Sheets—If total assets on line 25, column (B) are \$250,000 or more, Form 990 must be filed instead of Form 990-EZ.

| | | | | | |
|----|---|-----------------------|---------|-----------------|-------|
| 22 | Cash, savings, and investments | (A) Beginning of year | 7287 | (B) End of year | 460 |
| 23 | Land and buildings | 23 | | | |
| 24 | Other assets (describe) OVERPAID PAYROLL TAXES RECEIVABLE | 24 | 4035 | | |
| 25 | Total assets | 25 | 11322 | | 460 |
| 26 | Total liabilities (describe) SCH. III | 26 | 28478 | | 731 |
| 27 | Net assets or fund balances (line 27 of column (B) must agree with line 21) | 27 | (17156) | | (271) |

For Paperwork Reduction Act Notice, see page 1 of the separate instructions.

Cal. No. 10842 EVL:kt 28 Form 990-EZ (1993)

Form 990-EZ (1995) **74-2358885** Page 2

Part III Statement of Program Service Accomplishments—(see instructions)

Describe what was achieved in carrying out the organization's exempt purposes. Fully describe the services provided, the number of persons benefited, or other relevant information for each program title.

| Program title | (Grants \$) | Expenses (Required for 501(c)(3) and (4) organizations and 4947(a)(1) trusts exempt for others.) |
|--|-------------|--|
| PRODUCTION OF TV PROGRAM HOTLINE FOR CITIZEN PARTICIPATION IN COMMUNITY PROBLEMS | 16038 | 16038 |
| 29 | | |
| 30 | | |
| 31 Other program services (attach schedule) | | |
| 32 Total program service expenses (add lines 28 through 31) | | 16038 |

Part IV List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated. See instructions.)

| (A) Name and address | (B) Title and average hours per week devoted to position | (C) Compensation (If not paid, enter -0-) | (D) Contributions to employee benefit plans & deferred compensation | (E) Expense account and other allowances |
|------------------------------|--|---|---|--|
| HOWARD CALLAWAY DENVER CO | CHAIRMAN 20 HRS./WK | 0 | 0 | 0 |
| KAY RIDDLE DENVER CO | SECY. / TREAS. 20 HRS./WK | 9384 | 0 | 0 |

Part V Other Information

33 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity. ☒ Yes ☐ No

Were any changes made to the organizing or governing documents but not reported to the IRS? ☒ Yes ☐ No

If "Yes," attach a conformed copy of the changes.

34 If the organization had income from business activities, such as those reported on lines 2, 6, and 7 (among others), but NOT reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T. ☒ Yes ☐ No

35 During the year covered by this return, did the organization have unrelated business gross income of \$1,000 or more or incur liability for the section 6033(e) tax on lobbying and political expenditures? ☒ Yes ☐ No

36 If "Yes," has it filed a tax return on Form 990-T, Exempt Organization Business Income Tax Return, for this year? ☒ Yes ☐ No

37 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement, see instructions. ☒ Yes ☐ No

37a Enter amount of political expenditures, direct or indirect, as described in the instructions. ☒ 37a NONE

37b Did the organization file Form 1120-POL, U.S. Income Tax Return for Certain Political Organizations, for this year? ☒ Yes ☐ No

38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee OR were any such loans made in a prior year and still unpaid at the start of the period covered by this return? ☒ Yes ☐ No

38b If "Yes," attach the schedule specified in the instructions and enter the amount involved. ☒ 38b N/A

39 Section 501(c)(7) organizations.—Enter:

a Initiation fees and capital contributions included on line 9 ☒ 39a N/A

b Gross receipts, included on line 9, for public use of club facilities (see instructions). ☒ 39b N/A

c Does the club's governing instrument or any written policy statement provide for discrimination against any person because of race, color, or religion? (If "Yes," attach statement; see instructions.) ☒ Yes ☐ No

40 List the states with which a copy of this return is filed. ☒ 40

41 The books are in care of ☒ THE FOUNDATION Telephone no. ☒ (303) 44-0502

Located at ☒ 1900 GRANT ST. - 250 DENVER CO ZIP code ☒ 80202

42 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041, U.S. Fiduciary Income Tax Return.—Check here ☐ and enter the amount of tax-exempt interest received or accrued during the tax year ☒ 42

Please Sign

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Signature of officer ☒ Date ☒ 10/14/94 Title

Preparer's signature ☒ Date ☒ 10/14/94 Check if self-employed ☐ Preparer's social security no. ☒ 523747189

Firm's name (for joint filers) ☒ NEWBELL & CO. P.C. E.I. No. ☒ 84-1102708

4991 INDEPENDENCE ST., WHEAT RIDGE, CO ZIP code ☒ 80033



SCHEDULE A
(Form 990)**Organization Exempt Under Section 501(c)(3)**
(Except Private Foundation, and Section 501(c)(29), 501(c)(28),
or Section 4947(a)(1) Nonexempt Charitable Trust)**Supplementary Information**

UUG-4

OMB no. 1545-0047

1993Department of the Treasury
Internal Revenue Service

Must be completed by the above organizations and attached to their Form 990 (or 990-EZ).

Name of the organization

ABRAHAM LINCOLN OPPORTUNITY FOUNDATION

Employer identification number

74-2358885

Part I**Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees**
(See instructions.) (List each one. If there are none, enter "None.")

| (a) Name and address of each employee paid more than \$30,000 | (b) Title and average hours per week devoted to position | (c) Compensation | (d) Contributions to employee benefit plans & deferred compensation | (e) Expense account and other allowances |
|---|--|------------------|---|--|
| NONE | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

Total number of other employees paid over \$30,000

0

Part II**Compensation of the Five Highest Paid Persons for Professional Services**
(See instructions.) (List each one. If there are none, enter "None.")

| (a) Name and address of each person paid more than \$30,000 | (b) Type of service | (c) Compensation |
|---|---------------------|------------------|
| NONE | | |
| | | |
| | | |
| | | |
| | | |

Total number of others receiving over \$30,000 for professional services

0

Part III**Statements About Activities**

Yes No

- During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? N/A
If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities. \$ N/A
Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.
- During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any of its trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary:
 - Sale, exchange, or leasing of property? 2a ✓
 - Lending of money or other extension of credit? 2b ✓
 - Furnishing of goods, services, or facilities? 2c ✓
 - Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)? SEE FORM 990-EZ - 2d ✓
 - Transfer of any part of its income or assets? 2e ✓
 If the answer to any question is "Yes," attach a detailed statement explaining the transactions.
- Does the organization make grants for scholarships, fellowships, student loans, etc.? 3 ✓
- Attach a statement explaining how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs qualify to receive payments. (See instructions.)

For Paperwork Reduction Act Notice, see page 1 of the instructions to Form 990 (or Form 990-EZ). Cat. No. 11285F Schedule A (Form 990) 1993

Exhibit 28

Schedule A (Form 990) 1983 **74-235-885** Page 2

Part IV Reason for Non-Private Foundation Status (See instructions for definitions.)

The organization is not a private foundation because it is (please check only ONE applicable box):

5 ☐ A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).

6 ☐ A school. Section 170(b)(1)(A)(ii). (Also complete Part V, page 3.)

7 ☐ A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).

8 ☐ A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(iv).

9 ☐ A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(v). Enter the hospital's name, city, and state: _____

10 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule below.)

11a ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vii). (Also complete the Support Schedule below.)

11b ☐ A community trust. Section 170(b)(1)(A)(viii). (Also complete the Support Schedule below.)

12 ☐ An organization that normally receives: (a) no more than 1/3 of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975, and (b) more than 1/3 of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions—subject to certain exceptions. See section 509(a)(2). (Also complete the Support Schedule below.)

13 ☐ An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in: (1) lines 5 through 12 above; or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). (See section 509(a)(3).)

Provide the following information about the supported organizations. (See instructions for Part IV, line 13.)

| (a) Name(s) of supported organization(s) | (b) Line number from above |
|--|----------------------------|
| | |
| | |

14 ☐ An organization organized and operated to test for public safety. Section 509(a)(4). (See instructions.)

Support Schedule (Complete only if you checked a box on lines 10, 11, or 12 above.) Use cash method of accounting. Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

| Calendar year (or fiscal year beginning in) ... | (a) 1982 | (b) 1981 | (c) 1980 | (d) 1979 | (e) Total |
|---|----------|----------|----------|----------|-----------|
| 15 Gifts, grants, and contributions received. (Do not include unusual grants. See line 28.) | 80000 | 42950 | 97750 | 0 | 226700 |
| 16 Membership fees received | | | | | |
| 17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is not a business unrelated to the organization's charitable, etc., purpose | | | 160 | | 160 |
| 18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975. | 211 | 108 | 384 | 57 | 760 |
| 19 Net income from unrelated business activities not included in line 18 | | | | | |
| 20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf | | | | | |
| 21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge | | | | | |
| 22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets | | | | | |
| 23 Total of lines 15 through 22 | 80211 | 49058 | 98244 | 57 | 227620 |
| 24 Line 23 minus line 17 | 80211 | 49058 | 98134 | 57 | 227460 |
| 25 Enter 1% of line 23 | 802 | 491 | 983 | 1 | |
| 26 Organizations described in lines 10 or 11: a Enter 2% of amount in column (e), line 24 b Attach a list (which is not open to public inspection) showing the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1989 through 1992 exceeded the amount shown in line 26a. Enter the sum of all these excess amounts here <u>SCH. IV</u> | | | | | 4549 |
| | | | | | 183358 |

(Support Schedule continued on page 3)

Exhibit 28

- 27 Organizations described on line 12:
- a Attach a list, for amounts shown on lines 15, 16, and 17, to show the name of, and total amounts received in each year from, each "disqualified person." Enter the sum of such amounts for each year:
 (1992) N/A (1991) (1990) (1989)
- b Attach a list to show, for 1989 through 1992, the name of, and amount included in line 17 for, each person (other than a "disqualified person") from whom the organization received, during that year, an amount that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. Include organizations described in lines 5 through 11, as well as individuals. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of all these differences (the excess amounts) for each year:
 (1992) N/A (1991) (1990) (1989)
- 28 For an organization described in line 10, 11, or 12, that received any unusual grants during 1989 through 1992, attach a list (which is not open to public inspection) for each year showing the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not include these grants in line 15. (See instructions.) NONE

Part V Private School Questionnaire
 (To be completed ONLY by schools that checked the box on line 6 in Part IV) N/A

| | Yes | No |
|--|-----|----|
| 29 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body? | | |
| 30 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships? | | |
| 31 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe; if "No," please explain. (If you need more space, attach a separate statement.) | | |
| 32 Does the organization maintain the following: | | |
| a Records indicating the racial composition of the student body, faculty, and administrative staff? | | |
| b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis? | | |
| c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships? | | |
| d Copies of all material used by the organization or on its behalf to solicit contributions? If you answered "No" to any of the above, please explain. (If you need more space, attach a separate statement.) | | |
| 33 Does the organization discriminate by race in any way with respect to: | | |
| a Students' rights or privileges? | | |
| b Admissions policies? | | |
| c Employment of faculty or administrative staff? | | |
| d Scholarships or other financial assistance? (See instructions.) | | |
| e Educational policies? | | |
| f Use of facilities? | | |
| g Athletic programs? | | |
| h Other extracurricular activities? If you answered "Yes" to any of the above, please explain. (If you need more space, attach a separate statement.) | | |
| 34a Does the organization receive any financial aid or assistance from a governmental agency? | | |
| b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement. | | |
| 35 Does the organization certify that it has complied with the applicable requirements of sections 4.01 through 4.05 of Rev. Proc. 75-50, 1975-2 C.B. 547, covering racial nondiscrimination? If "No," attach an explanation. (See instructions for Part V.) | | |

Exhibit 28

Schedule A (Form 990) 1993

74-23-8885

0087

Page 4

Part VI-A Lobbying Expenditures by Electing Public Charities (See instructions.)
(To be completed ONLY by an eligible organization that filed Form 5768)

N/A

Check here ☐ a If the organization belongs to an affiliated group (see instructions).
Check here ☐ b If you checked a and "limited control" provisions apply (see instructions).

| Limits on Lobbying Expenditures | | (a) Affiliated group totals | (b) To be completed for ALL electing organizations |
|--|--|-----------------------------------|---|
| (The term "expenditures" means amounts paid or incurred) | | | |
| 36 | Total lobbying expenditures to influence public opinion (grassroots lobbying) | 36 | |
| 37 | Total lobbying expenditures to influence a legislative body (direct lobbying) | 37 | |
| 38 | Total lobbying expenditures (add lines 36 and 37) | 38 | |
| 39 | Other exempt purpose expenditures (see Part VI-A instructions) | 39 | |
| 40 | Total exempt purpose expenditures (add lines 38 and 39) (see instructions) | 40 | |
| 41 | Lobbying nontaxable amount. Enter the amount from the following table— If the amount on line 40 is— The lobbying nontaxable amount is— Not over \$500,000 20% of the amount on line 40 Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000 Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000 Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000 \$1,000,000 | 41 | |
| 42 | Grassroots nontaxable amount (enter 25% of line 41) | 42 | |
| 43 | Subtract line 42 from line 36. Enter -0- if line 42 is more than line 36 | 43 | |
| 44 | Subtract line 41 from line 38. Enter -0- if line 41 is more than line 38 | 44 | |

Caution: File Form 4720 if there is an amount on either line 43 or line 44.

4-Year Averaging Period Under Section 501(h)(Some organizations that made a section 501(h) election do not have to complete all of the five columns below.
See the instructions for lines 45 through 50.)

| Calendar year (or fiscal year beginning in) ▶ | Lobbying Expenditures During 4-Year Averaging Period | | | | |
|--|--|-------------|-------------|-------------|--------------|
| | (a) 1993 | (b) 1992 | (c) 1991 | (d) 1990 | (e) Total |
| 45 Lobbying nontaxable amount (see instructions) | | | | | |
| 46 Lobbying ceiling amount (150% of line 45(a)) | | | | | |
| 47 Total lobbying expenditures (see instructions) | | | | | |
| 48 Grassroots nontaxable amount (see instructions) | | | | | |
| 49 Grassroots ceiling amount (150% of line 48(a)) | | | | | |
| 50 Grassroots lobbying expenditures (see instructions) | | | | | |

Part VI-B Lobbying Activity by Nons electing Public Charities
(For reporting by organizations that did not complete Part VI-A)

N/A

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:

| | Yes | No | Amount |
|--|-----|----|--------|
| a Volunteers | | | |
| b Paid staff or management (include compensation in expenses reported on lines c through h) | | | |
| c Media advertisements | | | |
| d Mailings to members, legislators, or the public | | | |
| e Publications, or published or broadcast statements | | | |
| f Grants to other organizations for lobbying purposes | | | |
| g Direct contact with legislators, their staffs, government officials, or a legislative body | | | |
| h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means | | | |
| i Total lobbying expenditures (add lines c through h) | | | |

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities.

Exhibit 28

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

| | | Yes | No |
|---|--|----------|----|
| a | Transfers from the reporting organization to a noncharitable exempt organization of: | Std(a) | ✓ |
| | (i) Cash | Std(i) | ✓ |
| | (ii) Other assets | Std(ii) | ✓ |
| b | Other transactions: | | |
| | (i) Sales of assets to a noncharitable exempt organization | Std(i) | ✓ |
| | (ii) Purchases of assets from a noncharitable exempt organization | Std(ii) | ✓ |
| | (iii) Rental of facilities or equipment | Std(iii) | ✓ |
| | (iv) Reimbursement arrangements | Std(iv) | ✓ |
| | (v) Loans or loan guarantees | Std(v) | ✓ |
| | (vi) Performance of services or membership or fundraising solicitations | Std(vi) | ✓ |
| c | Shaping of facilities, equipment, mailing lists, other assets, or paid employees | c | ✓ |

d. If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (c) the value of the goods, other assets, or services received.

[illegible]

52a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☐ No

[illegible]

ALOF
0089

ABRAHAM LINCOLN OPPORTUNITY FOUNDATION, INC.
74-2358885
1993 FORM 990EZ

SCHEDULE I

PART I - LINE 1 - CONTRIBUTORS WHOSE CONTRIBUTIONS FOR
1993 ARE \$5,000 OR MORE

| | | |
|--------------------------|---------|--------|
| GOPAC | | |
| 440 FIRST STREET NW | | |
| SUITE 400 | | |
| WASHINGTON, DC 20001 | 12/6/93 | 43,785 |
| (FORGIVENESS OF DEBT DUE | | |
| BY FOUNDATION TO GOPAC | | |
| FOR 1990 TV PRODUCTION | | |
| EXPENSES) | | |

SCHEDULE II

PART I - LINE 16 - OTHER EXPENSES

| | |
|------------------|---------------|
| PRODUCTION COSTS | 16,038 |
| BANK CHARGES | 33 |
| INTEREST EXPENSE | 6 |
| OFFICE EXPENSES | 492 |
| TAXES AND FEES | 174 |
| TELEPHONE | 62 |
| TRAVEL | 1,374 |
| | <u>18,179</u> |

SCHEDULE III

PART II - LINE 26 - OTHER LIABILITIES

| | BEGINNING OF YEAR | END OF YEAR |
|-----------------------|-------------------------|-------------------|
| LOAN PAYABLE | 27,747 | - |
| PAYROLL TAXES PAYABLE | 731 | 731 |
| | <u>28,478</u> | <u>731</u> |

Exhibit 28

ALUF
0090

ABRAHAM LINCOLN OPPORTUNITY FOUNDATION, INC.
74-2358885
1993 FORM 990EZ
SCHEDULE A (FORM 990)

SCHEDULE IV

PART IV - LINE 26b - CONTRIBUTORS WHOSE GIFTS FOR 1989 THROUGH
1992 EXCEEDED THE AMOUNT SHOWN ON LINE
26b - \$4,549

| | | | |
|--------------------------------------|----------|--------|--------|
| FAMILY CHANNEL | 6/28/90 | 22,250 | |
| | 10/25/90 | 25,500 | 47,750 |
| HOWARD H. CALLAWAY FOUNDATION | 9/20/90 | 5,000 | |
| | 11/01/90 | 20,000 | |
| | 8/22/91 | 10,000 | |
| | 1/17/92 | 15,000 | |
| | 2/10/92 | 10,000 | |
| | 3/30/92 | 20,000 | 80,000 |
| BRUCE & MARY BENSON | 8/23/90 | | 10,000 |
| AMILORE FOUNDATION | 9/06/90 | | 5,000 |
| RJR NABISCO, INC. | 10/17/90 | | 5,000 |
| CITIZENS AGAINST GOVERNMENT WASTE | 8/02/91 | | 37,000 |
| R. RICHARDSON TRUST | 4/24/92 | | 25,000 |
| HENDERSON FOUNDATION | 12/28/92 | | 10,000 |

Exhibit 28

443 **2758**
 (Rev. July 1993)
 Department of the Treasury
 Internal Revenue Service

**Application for Extension of Time To File
 Certain Excise, Income, Information, and Other Returns**

0091
 OMB No. 1545-0148
 Expires 5-31-95

▶ File a separate application for each return.

| | | |
|---|---|--|
| Name of person or entity (Print the name and one copy by the due date for filing your return. See instructions on back.) | Name <u>ABRAHAM LINCOLN OPPORTUNITY FOUNDATION</u> Number and street for P.O. box no. if mail is not delivered to street address <u>1900 GRANT ST</u> City, town or post office, state, and ZIP code. For a foreign address, see instructions. <u>DENVER, CO 80202</u> | Employer identification number <u>74-2358885</u> Apt. or suite no. <u>850</u> |
|---|---|--|

Note: Corporate income tax return filers must use Form 7004 to request an extension of time to file. Partnerships, REMICs, and trusts (except those filing Form 990-T) must use Form 8736 to request an extension of time to file.

1. An extension of time until AUGUST 15, 19 94, is requested to file (check only one):

| | | | | |
|--|--|--|------------------------------------|------------------------------------|
| <input type="checkbox"/> Form 706GS(D) | <input type="checkbox"/> Form 990-T (401(a) or 408(a) trust) | <input type="checkbox"/> Form 1042-S | <input type="checkbox"/> Form 6069 | <input type="checkbox"/> Form 8831 |
| <input type="checkbox"/> Form 706GS(T) | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 1120-ND (4951 taxes) | <input type="checkbox"/> Form 8612 | |
| <input checked="" type="checkbox"/> Form 990 or 990-EZ | <input type="checkbox"/> Form 1041 (estate) (see instructions) | <input type="checkbox"/> Form 3520-A | <input type="checkbox"/> Form 8613 | |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 4720 | <input type="checkbox"/> Form 8725 | |
| <input type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1042 | <input type="checkbox"/> Form 5227 | <input type="checkbox"/> Form 8804 | |

If the organization does not have an office or place of business in the United States, check this box. ☐

2a. For calendar year 19 94, or other tax year beginning and ending

b. If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

3. Has an extension of time to file been previously granted for this tax year? ☐ Yes ☒ No

4. State in detail why you need the extension. ADDITIONAL TIME IS NEEDED TO ANALYZE CERTAIN ACCOUNTS AND COMPLETE THE INFORMATION NECESSARY TO FILE A COMPLETE AND ACCURATE RETURN

5a. If this form is for Form 706GS(D), 706GS(T), 990-BL, 990-PF, 990-T, 1041 (estate), 1042, 1120-ND, 4720, 6069, 8612, 8613, 8725, 8804, or 8831, enter the tentative tax, less any nonrefundable credits. See instructions. \$ _____

b. If this form is for Form 990-PF, 990-T, 1041 (estate), 1042, or 8804, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. \$ _____

c. Balance due. Subtract line 5b from line 5a. Include your payment with this form, or deposit with FTD coupon if required. See instructions. \$ NONE

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete; and that I am authorized to prepare this form.

Signature Toni L. Newbill Title C.P.A. Date 5/10/94

FILE ORIGINAL AND ONE COPY: The IRS will show below whether or not your application is approved and will return the copy.

Notice to Applicant—To Be Completed by the IRS

☒ We HAVE approved your application. Please attach this form to your return.

☐ We HAVE NOT approved your application. However, we have granted a 10-day grace period from the later of the date shown below or the due date of your return (including any prior extensions). This grace period is considered to be a valid extension of time for elections otherwise required to be made on a timely return. Please attach this form to your return.

☐ We HAVE NOT approved your application. After considering the reasons stated in Part IV, we cannot grant your request for an extension of time to file. We are not granting the 10-day grace period.

☐ We cannot consider your application because it was filed after the due date of the return for which an extension was requested.

By Charles A. Funch Director Date _____

If you want a copy of this form to be returned to an address other than that shown above, please enter the address to which the copy should be sent.

| | |
|---|----------------------------------|
| Name <u>Toni L. Newbill</u> Number and street for P.O. box no. if mail is not delivered to street address <u>4891 INDEPENDENCE ST</u> City, town or post office, state, and ZIP code. For a foreign address, see instructions. <u>WHEAT RIDGE, CO 80033-6714</u> | Apt. or suite no. <u>1235</u> |
|---|----------------------------------|

Exhibit 28

For Paperwork Reduction Act Notice, see back of form. Cat. No. 119768 Form 2758 (Rev. 7-93)

Form **2758**
Rev. July 1993

Department of the Treasury
Internal Revenue Service

Application for Extension of Time to File
Certain Excise, Income, Information, and Other Returns

OMB No. 1545-0148
Expires 5-31-95

File a separate application for each return.

Name: **ABRAHAM LINCOLN OPPORTUNITY FOUNDATION**

Employer identification number: **74-2358885**

Number and street (or P.O. box no., if mail is not delivered to street address):
1900 GRANT STREET

City, town or post office, state, and ZIP code. For a foreign address, see instructions.
DENVER CO 80203

ADL or suite no.: **850**

Note: Corporate income tax return filers must use Form 7004 to request an extension of time to file. Partnerships, REMICs, and trusts (except those filing Form 990-T) must use Form 8736 to request an extension of time to file.

1 An extension of time until **01 OCTOBER 15 1994** is requested to file (check only one):

| | | | | |
|---|--|--|------------------------------------|------------------------------------|
| <input type="checkbox"/> Form 706GS(D) | <input type="checkbox"/> Form 990-T (401(a) or 408(a) trust) | <input type="checkbox"/> Form 1042-S | <input type="checkbox"/> Form 6069 | <input type="checkbox"/> Form 8231 |
| <input type="checkbox"/> Form 706GS(T) | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 1120-ND (4951 taxes) | <input type="checkbox"/> Form 8612 | |
| <input checked="" type="checkbox"/> Form 990 or 990-E | <input type="checkbox"/> Form 1041 (estate) (see instructions) | <input type="checkbox"/> Form 3520-A | <input type="checkbox"/> Form 8613 | |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 4720 | <input type="checkbox"/> Form 8725 | |
| <input type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1042 | <input type="checkbox"/> Form 5227 | <input type="checkbox"/> Form 8804 | |

If the organization does not have an office or place of business in the United States, check this box. ☐

2a For calendar year 19 **93**, or other tax year beginning and ending

b If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period

3 Has an extension of time to file been previously granted for this tax year? ☐ Yes ☒ No

4 State in detail why you need the extension. **TAXPAYER WILL BE FILING A FINAL RETURN. ADDITIONAL TIME IS NECESSARY TO COMPILE AND RECONCILE THE INFORMATION TO FILE A COMPLETE AND ACCURATE RETURN.**

5a If this form is for Form 706GS(D), 706GS(T), 990-BL, 990-PF, 990-T, 1041 (estate), 1042, 1120-ND, 4720, 6069, 8612, 8613, 8725, 8804, or 8831, enter the tentative tax, less any nonrefundable credits. See instructions. \$

b If this form is for Form 990-PF, 990-T, 1041 (estate), 1042, or 8804, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. \$

c Balance due. Subtract line 5b from line 5a. Include your payment with this form, or deposit with FTD coupon if required. See instructions. \$

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete; and that I am authorized to prepare this form.

Signature: **Joni L. Newbill** Title: **Certified Public Accountant** Date: **8/15/94**

FILE ORIGINAL AND ONE COPY. The IRS will show below whether or not your application is approved and will return the copy.

Notice to Applicant—To Be Completed by the IRS

☐ We HAVE approved your application. Please attach this form to your return.

☐ We HAVE NOT approved your application. However, we have granted a 10-day grace period from the later of the date shown below or the due date of your return (including any prior extensions). This grace period is considered to be a valid extension of time for elections otherwise required to be made on a timely return. Please attach this form to your return.

☐ We HAVE NOT approved your application. After considering the reasons stated in item 4, we cannot grant your request for an extension of time to file. We are not granting the 10-day grace period.

☐ We cannot consider your application because it was filed after the due date of the return for which an extension was requested.

☐ Other:

Director: _____ By: _____ Date: _____

RECEIVED
AUG 18 1994
AUSTIN TEXAS

If you want a copy of this form to be returned to an address other than that shown above, please enter the address to which the copy should be sent:

Name: **NEWBILL & CO. P.C.**

Number and street (or P.O. box no., if mail is not delivered to street address):
4991 INDEPENDENCE ST.

City, town or post office, state, and ZIP code. For a foreign address, see instructions.
WHEAT RIDGE CO 80033-6714

ADL or suite no.: **1265**

Exhibit 28

For Paperwork Reduction Act Notice, see back of form. Cat. No. 119768 Form 2758 (Rev. 7-93)

EXHIBIT 29**GOPAC**

THE NATIONAL
GRASS-ROOTS
ORGANIZATION
BUILDING
REPUBLICAN
LEADERS FOR
AMERICA'S
FUTURE

440 FIRST STREET
NORTHWEST
SUITE 400
WASHINGTON, D.C.
20001

PHONE (202) 484-2282
FAX (202) 783-3306

NEWT GINGRICH
GENERAL CHAIRMAN
HOWARD H. CALLAWAY
CHAIRMAN

Eisenach
4651

TELECOPY TRANSMISSION
COVER SHEET

FAXED

TO DAN SWANINGER CC: June Weiss
FROM JEFF EISENACH
DATE 2/28/92
TOTAL # OF PAGES (including cover sheet) 2

REMARKS/MESSAGES

Let's discuss Monday
[Signature]

TROUBLE? - PLEASE CALL (202) 484-2282

Exhibit 29



GOPAC

Eisenach
4652Jeffrey A. Eisenach
Executive Director

February 27, 1992

Dear Randy,

It was good talking with you today. I hope Newt's review of the proposal we discussed will be helpful in making a decision.

I've enclosed, as promised, a package on the "Change Congress NOW!" project GOPAC has underway. As we discussed, we would love to have you as a GOPAC Charter Member. As you know, the Charter Program involves a \$10,000 commitment, towards which we are able to accept either personal or corporate funds.

With respect to foundation funds, it is of course not appropriate for GOPAC to accept 501(c)3 money. However, Bo Callaway does have a foundation, the Abraham Lincoln Opportunity Foundation (ALOF), which owes GOPAC a substantial sum of money. You might consider a contribution to ALOF, which would enable it to pay down its GOPAC debt, and thus be of enormous help in our efforts to change the Congress in 1992.

I've asked Bo Callaway to give you a call next week, and hope you'll consider getting involved in what we believe is the best opportunity to change Congress we're likely to see for quite some time.

Sincerely,

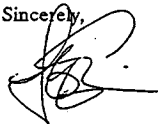
R. Randolph Richardson
477 Madison Ave., 17th Floor
New York, NY 10022440 First Street, N.W. • Suite 400 • Washington, D.C. 20001
Phone (202) 484-2282 Fax (202) 783-3306
Authorized and paid for by GOPAC

Exhibit 29

THE GRACE JONES RICHARDSON TRUST

P. O. BOX 20124
Greensboro, North Carolina 27420GOPAC2
2410Rec'd 4/20/92ALOF

April 14, 1992

R.R. Richardson *ju*Mr. Howard H. Callaway, Chairman
Abraham Lincoln Opportunity Foundation
440 First St., NW, Suite 400
Washington, DC 20001

Dear Mr. Callaway:

On behalf of the trustees of The Grace Jones Richardson Trust and at the direction of Mr. R. Randolph Richardson, we are happy to enclose our check in the amount of \$25,000.00.

Any acknowledgment of this grant should be sent directly to Mr. Richardson at 477 Madison Avenue, 17th Floor, New York, New York 10022.

Very truly yours,

The Grace Jones Richardson Trust

LLS/jc

Enclosure - Check No. 2133

cc: Mr. R. Randolph Richardson

Exhibit 29

| | | |
|---|--|-------------------|
| GRACE JONES RICHARDSON TRUST P. O. BOX 20124 GREENSBORO, NC 27420 | | 2133 66-55/531 |
| PAY TO THE ORDER OF <u>Abraham Lincoln Opportunity Foundation</u> | | April 14, 1992 |
| EXACTLY <u>\$25,000 AND 00 CTS</u> | | \$25,000.00 |
| DOLLARS | | |
| NCNB National Bank of North Carolina Greensboro, NC 27420 | | |
| FOR <u>Grant</u> | | |
| ⑈00002133⑈ ⑈053100559⑈ 021135678⑈ | | |

EXHIBIT 30**GOPAC**

THE NATIONAL
GRASS-ROOTS
ORGANIZATION
BUILDING
REPUBLICAN
LEADERS FOR
AMERICA'S
FUTURE

440 FIRST STREET
NORTHWEST
SUITE 400
WASHINGTON, D.C.
20001

PHONE (202) 484-2282
FAX (202) 783-3306

NEWT GINGRICH
GENERAL CHAIRMAN
HOWARD H. CALLAWAY
CHAIRMAN

Eisenach
3724

TELECOPY TRANSMISSION
COVER SHEET

FAXED

TO Bo Callaway c/o Kay Riddle c: June
FROM JEFF E.
DATE 3/19
TOTAL # OF PAGES (including cover sheet) 2

REMARKS/MESSAGES

Per June's note, we'll
be eternally grateful if
Bo would make a \$2000
ALOOF payment. He & Beth
are of these charter
members.


TROUBLE? - PLEASE CALL (202) 484-2282



Eisenach
3725

March 16, 1992

MEMORANDUM FOR JUNE WEISS

FROM: Jeff Eisenach 

SUBJECT: Bo's Charter Dues

Bo has offered us a choice of (1) \$10,000 from him or (2) \$20,000 from ALOF. I indicated to him on the phone today I would tend to go for \$20,000 over \$10,000 -- in part, frankly, because I think we ought to go ahead and get the ALOF loan repaid and be done with it, as opposed to having it hanging around for another year.

In any event, let me know what you think on this and I'll get back to Bo.



 go to ALOF


Exhibit 30

EXHIBIT 31

*Rec'd 3/31/92
Aldf/cm dues
Boo: Beth Callaway*

HOWARD H. CALLAWAY
FOUNDATION INC.
1900 GRANT STREET
SUITE 850
DENVER, COLORADO 80203
(303) 894-0502

GOPAC2
0011

March 23, 1992

Ms. June Weiss
GOPAC
440 First Street, NW, Suite 400
Washington, DC 20001

Dear June:

The trustees of the Howard H. Callaway Foundation are happy to enclose a check in the amount of \$20,000.00 to be used for the important work of the Abraham Lincoln Opportunity Foundation.

Keep up the good work.

Sincerely,



HHC:lk

Exhibit 31

| | | |
|--|------------------|--------------------|
| HOWARD H. CALLAWAY FOUNDATION INC. 1900 GRANT STREET SUITE 850 DENVER, CO 80203 | | 252 |
| March 23, 1992 | | 5-123 110 |
| Pay to the Order of Abraham Lincoln Opportunity Foundation, \$ 20,000.00 | | |
| Twenty Thousand dollars and No/100----- | | Dollars |
| Robinson Humphrey / American Express FINANCIAL MANAGEMENT ACCOUNT™ <small>Being Sent Direct and Trust Company One Bank Place, Boston, MA 02109</small> | | |
| 105 | For Contribution | Howard H. Callaway |
| ⑆0⑆100⑆234⑆ 1200418105⑆ | | 0252 |

ABRAHAM LINCOLN OPPORTUNITY FOUNDATION

Howard H. Callaway
Chairman
Stacey A. Oswalt
Director of Development

GOPAC2
0012

March 31, 1992

The Honorable Howard H. Callaway
Howard H. Callaway Foundation, Inc.
1900 Grant Street
Suite 850
Denver, Colorado 80203

Dear Mr. Callaway:

On behalf of the staff and creditors of the Abraham Lincoln Opportunity Foundation, I would like to thank you and the trustees of the Howard H. Callaway Foundation for your generous contribution.

Your support is greatly appreciated, and please know that the important work of the Abraham Lincoln Opportunity Foundation will continue.

Yet Bo! never
 Thanks, Bo! & Cholin
 hugs + Hugs +
 kisses!
 Smooch Smooch! Thanks! Joey
 Thanks! Jeff
 xoo
 Sennie
 Love Kisses! Stacy
 Banny
 Haha! great, Bo! Luv. Austin
 Best wishes,
 June E. Weiss
 Finance Director
 Thanks!! Mary
 Candy

440 First Street, N.W., Suite 400 • Washington, D.C. 20001 • Phone: (202) 484-2312 Fax: (202) 783-3306
1900 Grant St., Suite 850 • Denver, Colorado 80203

Exhibit 31

EXHIBIT 32

(Coulton Hotel Sander
 Petrone - George Bernard
 1992 letters to Florida Governor
 GOPAC under base to
 (Coulton Hotel Sander - 3
 shares - 100,000
 to date paid at base =
 he liked it 3 separately
 Finance Office # 2
 File Cabinet 2
 "Petrone"
 file
 GOPAC2
 2424
 GOPAC2
 2426
 due 12/93

GOPAC2
 2425
 file
 Petrone
 file
 George Bernard
 file
 12/93

EXHIBIT 33

NEWBILL 0119

*Newbill & Co.**A Professional Corporation**Certified Public Accountants*

4891 Independence Street — Suite 235

Wheat Ridge, CO 80033-6714

FAX (303) 456-1040

(303) 456-1120

November 15, 1993

Ms. Kay W. Riddle
Abraham Lincoln Opportunity Foundation
1900 Grant St. — Suite 850
Denver, CO 80202

Dear Kay:

It was a pleasure to meet with you today. I hope all went well in Oakland and that you had an enjoyable trip. I am enclosing the following items for your files:

- Copy of 1992 Form 990EZ information tax return
- Copy of letter to Internal Revenue Service re: multiple employer ID numbers
- Copies of powers of attorney related to above letter to IRS

I mailed the tax return today by certified mail, return receipt requested. The receipt should come directly to your office. So if you do not get it within the next week to 10 days, please let me know so that we can track it down. We should receive a reply to my letter to the IRS within the next six weeks. Hopefully, this will clear up all the problems you have been having with them.

Between August 21st and December 27, 1990, GOPAC loaned the ALOF \$45,000 in cash to help fund ALOF programs. ALOF sent two checks to GOPAC in early 1991 for \$47,000, which the accountants applied toward partial repayments of these loans and showed the remainder as program expenses in 1991. There are not, however, any receipts or invoices from GOPAC in ALOF's files which show a breakdown of the money sent to GOPAC in 1991 or in 1992. Without these invoices, or any other documentation from GOPAC as to how this money was spent in ALOF's behalf, ALOF has no proof that any of the money sent to GOPAC was used for non-partisan, non-profit programs. GOPAC needs to send ALOF a detailed accounting of how the money they received from ALOF was used.

As soon as you receive this information from GOPAC, we can amend the 1991 and 1992 returns to show that the loans have been fully repaid and adjust the 1991 expenses to actual program expenses for that year. I will be happy to talk to someone at GOPAC directly, if you feel that it would help them to understand exactly what they need to research and provide to you.

NEWBILL 0120

Abraham Lincoln Opportunity Foundation
November 15, 1993
Page 2

Please do not hesitate to call me if you have any questions about the enclosed documents, or need any assistance in obtaining the GOPAC information. I will monitor the employer ID number correspondence with the IRS and inform you when I have heard from them. It is a pleasure to be of service to you and look forward to working with you in the future.

Very truly yours,



Toni L. Newbill
Newbill & Co., P.C.
Certified Public Accountants

Exhibit 33

EXHIBIT 34ALOF
0028**ABRAHAM LINCOLN OPPORTUNITY FOUNDATION**

Edward H. Callaway, Chairman

December 2, 1993

Ms. Judy Barrett
GOPAC
440 First Street, NW, Suite 400
Washington, DC 20001

Dear Judy:

Hope all is well with you and your family.

Bo and I are in the final stages of closing out the Abraham Lincoln Opportunity Foundation, but before we can do that, our accountant needs additional information.

Between August 21 and December 27, 1990, GOPAC loaned ALOF \$45,000 in cash to help fund ALOF programs. ALOF sent two checks to GOPAC in early 1991 for \$47,000, which the accountants applied toward partial repayments of these loans and showed the remainder as program expenses in 1991. There are not, however, any receipts or invoices from GOPAC in ALOF's files which show a breakdown of the money sent to GOPAC in 1991 or in 1992. Without these invoices, or any other documentation from GOPAC as to how this money was spent in ALOF's behalf, ALOF has no proof that any of the money sent to GOPAC was used for non-partisan, non-profit programs. GOPAC needs to send ALOF a detailed accounting of how the money they received from ALOF was used.

As soon as we receive this information from GOPAC, we can amend the 1991 and 1992 returns to show that the loans have been fully repaid and adjust the ~~1991~~ expenses to actual program expenses for that year.

Our accountant is Toni L. Newbill at 303-456-1120, and she would be glad to talk to you if that would help. We are really trying to get this all put to bed.

Best wishes for a happy holiday season. Hope to see you next week when I'm in D.C. for NET.

Love,



Kay Riddle
KWR:lk

EXHIBIT 35ALU
0029

MEMO

FOR: Kay Riddle & Toni Newbill
 FROM: Judy Barrett
 RE: Summary of GOPAC receivable from A.L.O.F.
 DATE: Dec 6, 1993

As you requested, the following is a summary of the financial activity between GOPAC and A.L.O.F.

| | | |
|---|-----------|--------|
| GOPAC cash to A.L.O.F. ('90-'91) | 74,500.00 | |
| (itemized deposits attached) | | |
| Billing for Services (documentation attached) | | |
| Office Supplies | 6,296.27 | #A9001 |
| Postage/Delivery | 2,158.81 | #A9002 |
| Rent | 12,718.08 | #A9003 |
| Staff | | |
| K. Riddle | 9,833.32 | #A9004 |
| (25% of Sal. Apr-Nov '90) | | |
| J. Barrett | 6,031.22 | |
| (25% of Sal. May-Dec '90) | | |
| Professional Services | | |
| Dan Swillinger | 12,000.00 | |
| (25% of retainer Jan-Oct '90) | | |
| J. Eisenach | 30,000.00 | |
| (75% fee Jun-Oct '90+ exp) | | |
| E. Mahe | 4,375.00 | |
| (25% of fee Jun-Oct '90) | | |
| S. Hanser | 2,625.00 | |
| (25% of fee Jun-Oct '90) | | |

 160,537.73

Payments received at GOPAC from A.L.O.F.

| | |
|----------|-----------|
| 8/6/91 | 37,000.00 |
| 8/21/91 | 10,000.00 |
| 1/21/92 | 15,000.00 |
| 3/31/92 | 20,000.00 |
| 4/29/92 | 25,000.00 |
| 12/30/92 | 10,000.00 |
| | ----- |

117,000.00

Exhibit 35

GOPAC

THE NATIONAL
GRASS-ROOTS
ORGANIZATION
BUILDING
REPUBLICAN
LEADERS FOR
AMERICA'S
FUTURE

440 FIRST STREET
NORTHWEST
SUITE 400
WASHINGTON, D.C.
20001
PHONE (202) 484-2282
FAX (202) 783-3306

NEWT GINGRICH
GENERAL COUNCIL
ALOF
0030

Cash to A.L.O.F. from GOPAC

| | |
|----------|-----------|
| 8/10/90 | 5000.00 |
| 8/15/90 | 6000.00 |
| 8/29/90 | 5000.00 |
| 9/13/90 | 10000.00 |
| 9/24/90 | 10000.00 |
| 10/26/90 | 5000.00 |
| 12/ /90 | 4000.00 |
| 2/11/91 | 29500.00 |
| TOTAL | 74,500.00 |

Handwritten: 45000



ALOF
0027GOPAC, INC.
440 FIRST STREET, N.W.
SUITE #400
WASHINGTON, D.C. 20001

INVOICE # A9004

BILL TO:

ABRAHAM LINCOLN OPPORTUNITY FOUNDATION
440 FIRST ST, N.W. #400
WASHINGTON, D.C. 20001

FOR:

MANAGEMENT & ADMINISTRATIVE SERVICES

Kay Riddle
25% of Salary Apr-Nov 1990 \$9,833.32Judy Barrett
25% of Salary May-Dec 1990 \$6,031.25

LEGAL & COMPLIANCE

Dan Swillinger
25% of Retainer Jan-Dec 1990 \$12,000.00

CONSULTANTS

Washington Policy Group
75% of Fee Jan-Oct 1990 \$30,000.00Eddie Mahe
25% of Fee Apr-Oct 1990 \$4,375.00Steve Manser
25% of Fee Apr-Oct 1990 \$2,625.00

TOTAL : \$64,864.57

Exhibit 35

GOPAC

THE NATIONAL
GRASS-ROOTS
ORGANIZATION
BUILDING
REPUBLICAN
LEADERS FOR
AMERICA'S
FUTURE

440 FIRST STREET
NORTHWEST
SUITE 400
WASHINGTON, D.C.
20001
PHONE (202) 484-2282
FAX (202) 783-3306

NEWT GINGRICH
GENERAL CHAIRMAN
HOWARD H. CALLAWAY
CHAIRMAN

ALOF
0026

INVOICE A9003

May 15, 1991

A.L.O.F.
440 First Street, NW
Washington, DC 20001

1990 Rent:

25% of office rent for June - November
(Total rent for the period= \$50,872.32)
8478.72 x 6 mos. x25%

\$12,718.08

Please Remit to GOPAC

Exhibit 35

GOPAC

THE NATIONAL
GRASS-ROOTS
ORGANIZATION
BUILDING
REPUBLICAN
LEADERS FOR
AMERICA'S
FUTURE

440 FIRST STREET
NORTHWEST
SUITE 400
WASHINGTON, D.C.
20001
PHONE (202) 484-2282
FAX (202) 783-3306

GERALD R. FORD
HONORARY CHAIRMAN
NEWT GINGRICH
GENERAL CHAIRMAN
HOWARD H. CALLAWAY
CHAIRMAN

GOPAC3 0811

INVOICE *A9001*

April 3, 1991

A.L.O.F.
440 First Street, NW
Washington, DC 20001

Federal Express for 1990
(see attached)

\$2158.81

Please remit to GOPAC

Authorized and paid for by GOPAC

Exhibit 35

377

EXHIBIT 36

WASHINGTON POLICY GROUP, INC.

COVER SHEET

DATE: 7/2/90

TO: STEVE H.

FROM: Jeff

NO. OF PAGES (INCL. COVER) 3

MESSAGE: Your HANDIWORK... HOPE
you APPROVE...

WGC2-01378

Exhibit 36

JUL- 2-30 MON 17:57

FAX NO. 0

P.02

July 2, 1990

MEMORANDUM FOR BO CALLAWAY AND KAY RIDDLE

FROM: Jeff Eisenach

SUBJECT: GOPAC/ACT Hours and the Future

This memo (a) reports on hours spent on GOPAC and ACT during the month of June and (b) suggests that we need to talk about a short-run problem that has developed with respect to Washington Policy Group.

June Hours

As we agreed, I've been keeping records of the time I've spent on GOPAC/ACT activities during the past month (i.e. from June 4 on). My general rules for recording hours were:

- o Record only hours that involved "blocks" of time (thus, these figures don't reflect a slew of 5-minute phone calls, quick memos, 10-minutes to review a letter drafted by Tom, etc.)
- o Record hours spent on "general planning" as GOPAC hours, even if ACT was discussed.
- o Record hours worked, without, in most cases, allowing for travel time, etc.
- o Record the three days spent in Atlanta as 12 hours each.
- o Make no effort to record overhead such as copying, faxing, messenger and mail, etc.

The results are reported below.

| <u>Time Period</u> | <u>GOPAC Hours</u> | <u>ACT Hours</u> | <u>Total Hours</u> |
|--------------------|--------------------|------------------|--------------------|
| 6/4-6/9 | 11.5 | 17.0 | 28.5 |
| 6/11-6/15 | 19.0 | 2.5 | 21.5 |
| 6/18-6/22 | 6.0 | 6.0 | 12.0 |
| 6/25-6/29 | 38.0 | 7.0 | 45.0 |
| TOTAL | 74.5 | 32.5 | 107.0 |

WGC2-01379

Exhibit 36

11-2-90 Nov 1990

FAX NO. 0

P.01

2

hus, I worked 107 out of 160 (4 x 40) "regular hours" during the month of June, or almost exactly two thirds of my time, for GOPAC. Of these, two-thirds were for regular GOPAC, and one-third for ACT. (This allocation is heavily affected, it should be noted, by the decision to record all planning hours as GOPAC hours, even if ACT was discussed.) Thus, one-third of my retainer (\$2,640 = \$8,000/3) should be billed to ACT.

A Short-Run Problem

As you know, our agreement concerning my work with GOPAC calls for me to spend the majority of my time on GOPAC work, but also acknowledges that I have other clients that demand some of my time and, more broadly, that non-GOPAC work is a piece of what allows Washington Policy Group to stay in business.

As a practical matter, regular retainers have never made up the entire difference. Thus, I've relied, successfully, on short-run projects (e.g. the book I wrote for Hudson on the budget process) to bring everything into balance. I expect to be able to continue to do this in the future.

In the short run, however, there is a problem, which is to some extent a function of AOW. As you know, from January 1990 through May 1990, I spent virtually 100 percent of my time working on AOW. The most important implication of this is that I spent virtually no time developing new business. That lack of investment in the future is the main source of the current problem -- i.e. there is not enough in the immediate pipeline to make it all work.

There are several possible solutions, which I think we should talk about

Even before we talk, however, let me be very open about my overall attitude. I see my relationship with GOPAC as one based on interest and commitment, much more than on time. The things I do with you and Newt are the things I have the greatest interest in and commitment to, and (by my choice) GOPAC will always get as much time as I can afford to give. As for ACT, far from being a problem in this sense, it simply heightens my interest in and commitment to spending time with GOPAC. Thus, I see our long-run historical relationship as a good model for the future, and my only question is how we can work together (synergistically!) to overcome a short-run problem with a minimum of friction.

Exhibit 36

WASHINGTON POLICY GROUP, INC.
ROUTING SLIP

Eisenach
4276

DATE: 8/6/90

TRANSMIT BY: CFAX HAND FEDEX MAIL

FROM: JEFF EISENACH

| | |
|--|---|
| TO: MARY BROWN <input type="checkbox"/> | LINDA NAVE <input type="checkbox"/> |
| BO CALLAWAY <input type="checkbox"/> | TOM MORGAN <input type="checkbox"/> |
| BILL DYKE <input type="checkbox"/> | KAY RIDDLE <input checked="" type="checkbox"/> (col.) |
| JOE GAYLORD <input type="checkbox"/> | FRED STEEPER <input type="checkbox"/> |
| MARIANNE GINGRICH <input type="checkbox"/> | DAN SWILLINGER <input type="checkbox"/> |
| NEWT GINGRICH <input type="checkbox"/> | LEN SWINEHART <input type="checkbox"/> |
| STEVE HANSEN <input type="checkbox"/> | PAUL WEYRICH <input type="checkbox"/> |
| EDDIE MAHE <input type="checkbox"/> | OTHERS <u>MARK C.</u> |
| DAN MEYER <input type="checkbox"/> | |

COMMENTS _____

August 6, 1990

Eisenach
4277

MEMORANDUM FOR KAY RIDDLE AND MARK COLUCCI

FROM: Jeff Eisenach

SUBJECT: GOPAC/ACT Hours

This memo reports on hours spent on GOPAC and ACT during the month of July.

As we agreed, I've been keeping records of the time I've spent on GOPAC/ACT activities during the past month. As in June, my general rules for recording hours were:

- o Record only hours that involved "blocks" of time (thus, these figures don't reflect a slew of 5-minute phone calls, quick memos, 10-minutes to review a letter drafted by Tom, etc.)

- o Record hours spent on "general planning" as GOPAC hours, even if ACT was discussed.

- o Record hours worked, without, in most cases, allowing for travel time, etc. (Exceptions are for major trips -- e.g. to California -- that require me to be away from the office for entire days. These are recorded at 12 hours/day.)

- o Make no effort to record overhead such as copying, faxing, messenger and mail, etc.

The results are reported below.

| <u>Time Period</u> | <u>GOPAC Hours</u> | <u>ACT Hours</u> | <u>Total Hours</u> |
|--------------------|--------------------|------------------|--------------------|
| 7/2-7/6 | 8.0 | 1.5 | 9.5 |
| 7/9-7/13 | 9.0 | 27.0 | 28.0 |
| 7/16-7/20 | 6.5 | 25.0 | 31.5 |
| 7/23-7/27 | 7.5 | 31.0 | 38.5 |
| 7/30-7/31 | 0.0 | 2.0 | 2.0 |
| TOTAL | 31.0 | 86.5 | 117.5 |

Thus, I worked 117.5 out of 160 (4 x 40) "regular hours" during the month of June, or nearly three-quarters thirds of my time, for GOPAC and ACTV. Of these, 26 percent were for regular GOPAC, and 74 percent for ACTV. Thus, 74 percent of my retainer (\$5,920 = \$8,000 x .74) should be billed to ACT.

Exhibit 36

Eisenach
4302ROUTING SLIPDATE: 9/24/90TRANSMIT BY: FAX HAND FEDEX MAIL

FROM: JEFF EISENACH

| | | | |
|-------------------|-------------------------------------|----------------|-------------------------------------|
| TO: MARY BROWN | <input type="checkbox"/> | LINDA NAVE | <input type="checkbox"/> |
| BO CALLAWAY | <input type="checkbox"/> | TOM MORGAN | <input type="checkbox"/> |
| MARK COLUCCI | <input checked="" type="checkbox"/> | KAY RIDDLE | <input checked="" type="checkbox"/> |
| JOE GAYLORD | <input type="checkbox"/> | LEN SWINEHART | <input type="checkbox"/> |
| MARIANNE GINGRICH | <input type="checkbox"/> | DAN SWILLINGER | <input type="checkbox"/> |
| NEWT GINGRICH | <input type="checkbox"/> | JIM TILTON | <input type="checkbox"/> |
| STEVE HANSER | <input type="checkbox"/> | PAUL WEYRICH | <input type="checkbox"/> |
| EDDIE MAHE | <input type="checkbox"/> | OTHERS | <input type="text"/> |
| DAN MEYER | <input type="checkbox"/> | | <input type="text"/> |


COMMENTS _____

Exhibit 36

Eisenach
4303

September 24, 1990

MEMORANDUM FOR KAY RIDDLE AND MARK COLUCCI

FROM: Jeff Eisenach 
SUBJECT: GOPAC/ACT Hours for August

This memo reports on hours spent on GOPAC and ACT during the month of August.

As we agreed, I've been keeping records of the time I've spent on GOPAC/ACT activities during the past month. As in the past, my general rules for recording hours were:

- o Record only hours that involved "blocks" of time (thus, these figures don't reflect a slew of 5-minute phone calls, quick memos, 10-minutes to review a letter drafted by Tom, etc.)
- o Record hours spent on "general planning" as GOPAC hours, even if ACT was discussed.
- o Record hours worked, without, in most cases, allowing for travel time, etc. (Exceptions are for major trips -- e.g. to California -- that require me to be away from the office for entire days. These are recorded at 12 hours/day.)
- o Make no effort to record overhead such as copying, faxing, messenger and mail, etc.

The results are reported below.

| <u>Time Period</u> | <u>GOPAC Hours</u> | <u>ACT Hours</u> | <u>Total Hours</u> |
|--------------------|--------------------|------------------|--------------------|
| 8/1-8/3 | 1.5 | 6.0 | 7.5 |
| 8/6-8/10 | 1.0 | 6.5 | 7.5 |
| 8/13-8/17 | 34.0 | 4.0 | 38.0 |
| 8/20-8/24 | 16.0 | 6.0 | 22.0 |
| 8/24-8/31 | 0.0 | 0.0 | 0.0 |
| TOTAL | 52.5 | 22.5 | 75.0 |

As you know, I was on vacation the last week of August. Thus, out of 120 (3 x 40) "regular hours" during the month of August, 62.5 percent of my time was spent working for GOPAC and ACTV. Of these hours, 30 percent were for ACTV, and 70 percent for GOPAC. Thus, 30 percent of my retainer (\$2,400 = \$8,000 x .3) should be billed to ACT.

Exhibit 36

EXHIBIT 37

CNB 0426

| | |
|---|---|
| <p>CITIZENS AGAINST GOVERNMENT WASTE 1301 CONVENT STREET NW FOURTH FLOOR WASHINGTON, DC 20036</p> | <p>AMERICAN SECURITY BANK WASHINGTON, D.C. 20004</p> |
|---|---|

7228

*** Thirty Seven Thousand & no/100 Dollars ***

| | | |
|---|---------------------|----------------------------|
| <p>PAY TO THE ORDER OF: Abraham Lincoln Opportunity Foundation 440 1st Street, N.W. #400 Washington, DC 20001</p> | <p>DATE: 8/2/91</p> | <p>AMOUNT: \$37,000.00</p> |
|---|---------------------|----------------------------|

[Signature]

#007228# 1054000554043 865 36 835# 0003700000#

DEPOSIT TICKET
ABRAHAM LINCOLN
OPPORTUNITY FOUNDATION
 440 1st Street, N.W.
 WASHINGTON, DC 20001

Central Bank
Denver
 1000 Broadway, Suite 1000
 Denver, CO 80202

CHECK NO. 3720040
 DATE 8/2/91
 AMOUNT \$37,000.00

TOTAL \$37,000.00

#007228# 1054000554043 865 36 835# 0003700000#

Exhibit 37

CNB 0428

AIRMAIL INCORPORATED
 OPTECH NEW FOUNDATION
 87 - 100 W. 10TH ST.
 DENVER, COLORADO 80202

1200
 8/2 91
 \$43,000.00
 Fourty Three Thousand and no/100
 HARRY S. EVAN THOUSANT OF
 Central Bank of Denver
 Denver, Colorado 80202
 Harry S. Evan
 Ray W. Riddle
 #001200# #162000539# #060909# #0003700000#

CNB 0432

ABRAHAM LINCOLN
OPPORTUNITY FOUNDATION
1225 EAST WYOMING ST.
DENVER, CO 80202

1201

August 21 1991

Pay to the
order of \$20,000.00

Central
Bank of Denver
Denver, Colorado 80202

John E. Smith
John E. Smith

001201 *102000539* *060909* *0001000000*

Exhibit 37

EXHIBIT 38

CNB 0449

| | | |
|---|--|---|
| ABRAHAM LINCOLN OPPORTUNITY FOUNDATION 1275 BELMONT PLACE DENVER, COLORADO 80202 | | 1206 23-537020 |
| Pay to the order of <i>ADPC</i> | | 4-23 1992 |
| Twenty-five thousand & no/100 | | 25000.00 Dollars |
| Central Bank of Denver Denver, Colorado 80202 | | <i>James E. Hansen</i> <i>July E. Hansen</i> |
| #001206# 1402000539# | | #050-909# #0002500000# |

Exhibit 38

CNB 0445

| | | |
|--|------------------------------------|----------------------------------|
| GRACE JONES RICHARDSON TRUST <small>P. O. BOX 20124 GREENSBORO, NC 27420</small> | | 2133 <small>96-10-231</small> |
| April 14, 1992 | | |
| PAY TO THE ORDER OF Abraham Lincoln Opportunity Foundation | EXACTLY \$25,000 AND 00 CTS | 25,000.00 DOLLARS |
| NCNB <small>NCNB National Bank P.O. Box 20124 Greensboro, NC 27420</small> | | |
| FOR Grant | | |
| *00002133* *053100559* 021135678* *0002500000* | | |

DEPOSIT TICKET 25-14-92

| ABRAHAM LINCOLN OPPORTUNITY FOUNDATION <small>1700 W. 13th St. Greensboro, NC 27401</small> | Central Bank Denver <small>1000 Broadway Denver, CO 80202</small> | DATE 4/20 DEPOSITED 25000 BY Richardson Trust FOR GRACE JONES RICHARDSON TRUST | | | | | | | | | | |
|--|---|--|------------------|------------------------------|-----------|--------------|-----|------|-------|--|------------------|------------------------------|
| <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th>DATE</th> <th>AMOUNT</th> <th>CHECK NO.</th> <th>DEPOSITED BY</th> <th>FOR</th> </tr> <tr> <td>4/20</td> <td>25000</td> <td></td> <td>Richardson Trust</td> <td>GRACE JONES RICHARDSON TRUST</td> </tr> </table> | | | DATE | AMOUNT | CHECK NO. | DEPOSITED BY | FOR | 4/20 | 25000 | | Richardson Trust | GRACE JONES RICHARDSON TRUST |
| DATE | AMOUNT | CHECK NO. | DEPOSITED BY | FOR | | | | | | | | |
| 4/20 | 25000 | | Richardson Trust | GRACE JONES RICHARDSON TRUST | | | | | | | | |
| TOTAL 25000 | | | | | | | | | | | | |

102000539 *060 909* 0510002500000

Exhibit 38

EXHIBIT 39

CNB 0447

| | | | |
|---|--|---|------------|
| 3/11/92 GORE Tyrone J. | | ABRAHAM LINCOLN OPPORTUNITY FOUNDATION 1275 TALMONT PLACE DENVER, COLORADO 80201 | 1205 |
| | | 3/31 19 92 | 23-23-1030 |
| Pay to the order of <u>NOPAC</u> | | 202491588 0-20-92 082 21 0243 | |
| Twenty thousand & 120/100 | | Dollars | |
| Central Bank of Denver Denver, Colorado 80202 | | <i>Jane E. Hansen</i> <i>Judy E. Hansen</i> | |
| ⑈001205⑈ ⑈102000539⑈ ⑈060⑈909⑈ ⑈0002000000⑈ | | | |

Exhibit 39

CNB 0443

| | | |
|--|--|--------------------|
| HOWARD H. CALLAWAY FOUNDATION INC 1900 GRANT STREET SUITE 850 DENVER, CO 80202 | | 252 6125 170 |
| Date: <u>March 23</u> 19 <u>92</u> | | |
| Pay to the Order of: <u>Abraham Lincoln Opportunity Foundation</u> \$ <u>20,000.00</u> | | |
| Twenty Thousand dollars and No/100 | | |
| Robinson Humphrey & Associates, P.C. FINANCIAL MANAGEMENT 1000 14th Street, Suite 1000 Denver, CO 80202 | | |
| C.N.B. 0443 | | |

Exhibit 39

EXHIBIT 40

CNB 0217

| | | |
|---|--|-------------------|
| ABRAHAM LINCOLN OPPORTUNITY FOUNDATION 1275 TREMONT PLACE DENVER, COLORADO 80204 | | 1208 253370207 |
| Pay to the order of <u>Ge PAC</u> | | 12/29/79 |
| 401804958 12-30-79 002 25 1180 | | \$11.80 |
| Kim Hammond x 100 | | Dollar |
| Central Bank of Denver Denver, Colorado 80202 | | 120553712 |
| *001208* 12102000519 | | 120553712 |

Exhibit 40

424

THE DREYFUS FAMILY TRUST

DREYFUS LIQUID ASSETS, INC.

THE BANK OF NEW YORK, WHITE PLAINS, NEW YORK

DATE Dec. 30, 1991

PAY TO THE ORDER OF Abelie Linda Orentlich, Trustee

Eight Thousand and no/100

23310-33 0000

MINIMUM OF \$500.00

E. TUCKER ANDERSEN
39 CLEVELAND RD
UPPER MERIDEN H. J. 07043

Donna

23310-33 0000

020190235210339000104560610421000015000000

[illegible]

Exhibit 40

CNB 0441

| | | |
|--|--|--------------------------------|
| ABRAHAM LINCOLN OPPORTUNITY FOUNDATION 1275 TERRY STREET DENVER, COLORADO 80202 | | 1203 |
| due GORR 1500 | January 17, 1992 | 25 18 0 00 |
| Pay to the order of <i>Y-PAC</i> | <i>1500</i> | 301430925 01-22-92 002 21 0100 |
| Central Bank of Denver Denver, Colorado 80202 | <i>John L. B...</i> <i>John L. B...</i> | Dollars |
| *001203* *102000539* *00000000* | *00000000* | *00000000* |

Exhibit 40

CNB 0459
6-29-10

HENDERSON FOUNDATION
P.O. BOX 430
ROXBURY, MA 01778

| EXP. CAUTION | SECURITY |
|--------------|----------|
| | |
| | |
| | |
| | |

632

PAY TO THE ORDER OF Twelve thousand Dollars and No Cents DOLLARS

DATE 6/11/12 TO THE ORDER OF Abraham Lincoln Opportunity Action Community Foundation, Inc.

BANK OF BOSTON
THE FIRST MONY BANK OF BOSTON

⑆000632⑆ ⑆00003500500⑆

DEPOSIT TICKET

ABRAHAM LINCOLN OPPORTUNITY FOUNDATION
1025 THURGOOD ARLOTT DRIVE
DENVER, CO 80202

Central Bank
Denver, CO

DATE 12/29/12

CHECKS THIS PAGE ONLY
Henderson Foundation
(Clermont) 19,000

CASH

CURRENCY

DEPOSITS MAY NOT BE AVAILABLE FOR ENDORSEMENT WITHHOLDING

⑆1020005337⑆ ⑆0000409⑆ ⑆000000000000⑆

TOTAL 19,000

Check and other items are subject to the bank's review and approval. Funds are not available for withdrawal until the next business day.

Exhibit 40

EXHIBIT 41

WASHINGTON POLICY GROUP, INC.

Mescon
0651

June 8, 1993

Dr. Timothy Mescon, Dean
School of Business Administration
P.O. Box 444
Marietta, Georgia 30061

Dear Tim:

This letter confirms our conversations in recent days concerning Washington Policy Group's role in the Kennesaw State College Foundation's "Renewing American Civilization" project.

As we have discussed, Washington Policy Group (WPG) is a small (three-person) project management and consulting firm located in Washington, DC. WPG has been in existence since March 1988, during which time our clients have included several major "think tanks," political campaigns and U.S. government agencies.

Among our most significant project management undertakings was the 1990 "American Opportunities Workshop" and its successor, American Citizens' Television. Both of these projects bear significant similarities to the project you have asked us to get involved with, "Renewing American Civilization." Thus, we enter this undertaking with both enthusiasm and a full understanding of the enormity and complexity of the undertaking.

As we have discussed, you wish to engage WPG to perform a complete array of project management services in connection with "Renewing American Civilization," reporting directly to you in your role with the Kennesaw State College Foundation. These services include:

1. Overall project management, including designing systems architecture, monitoring deadlines, overseeing project staff, budget development, monitoring income and expenditures, etc. (The scope of the project is described more completely in the attached "Budget Justification" which WPG has prepared in conjunction with its work and you have approved.)
2. Specific responsibility for working directly with you and with Congressman Gingrich in the development of the substance of the class.
3. Specific responsibility for working directly with you and with Congressman Gingrich in seeking financial support for the class.

In order to permit WPG to undertake these tasks on behalf of the Kennesaw State College Foundation (the Foundation), WPG and the Foundation agree to the following:

Kennesaw State College Foundation
Dr. Timothy Mescon
June 8, 1993
Page Two

Mescon
0652

1. WPG agrees to provide comprehensive project management services, as described above, to the Kennesaw State College Foundation's Renewing American Civilization project. In performing these services, WPG expects to devote approximately "half-time" of its three salaried employees for the period June 1 through September 30, 1993.

2. In compensation for these services, the Foundation agrees to pay WPG \$35,000, payable in four equal installments on June 15, July 15, August 15 and September 15, 1993. In addition, the Foundation agrees to reimburse WPG for out-of-pocket costs incurred in connection with the project, including travel expenses, long-distance fees, out-of-house photocopying, materials, etc., provided these costs fall within the budget projections for these items in the Budget Justification.

3. This agreement terminates September 30, 1993.

4. Either party may terminate this agreement prior to September 30 upon 60 days written notice. The Foundation may terminate the agreement at any time in the event WPG personnel engage in illegal or unethical conduct having a detrimental effect upon the Foundation, its Board Members, officers or employees.

As you know, we are very excited about this project and look forward to playing a productive role in bringing it to a successful conclusion. If you have any questions about the above, please feel free to call. And, if the above accurately represents our agreement, please sign in the space provided below and return a copy of this agreement to me at the above address.

Sincerely,


Jeffrey A. Eisenach
President

Agreed,

Timothy S. Mescon
Kennesaw State College Foundation

Date

Exhibit 41

EXHIBIT 42GOPAC
2482GOPAC
0890

Newt Gingrich

General Chairman
GOPAC

to Owen Roberts

Dear Owen,
Thank you for the
diver group check.Your courage, your voice,
your intellectual support and
your financial support all
play a part in making it
possible for me to continue
to push forward.Renewing American civilization
is really going to be amazing -
It all started in your
planning room. Thank you
your friend

Newt

4/15/93

Not prepared or mailed at Government expense. Authorized and paid for by GOPAC, Daniel J. Swilling, Treasurer.

Exhibit 42

Distribution:

1. Original
2. NEWT
3. STEVE
4. ~~LEE~~
5. JEFF
6. RACHEL

Ref. JEB
Phone time
Proposed
2 JEB
2 JEB
1 April

NEWT'S Easel Sheets

FRIDAY, 18 DEC 1992: #1 → #13
EASEL EASEL

Saturday, 19 Dec 1992: #14 → #22
EASEL EASEL

Belleair Bluffs, Florida

FRIDAY, 18 DEC 1992
Sat, 19 DEC 1992

Exhibit 42

HAN 02103

Congress - primary mission

Advocate of civilization

Definer of civilization

Teacher of the rules of civilization

Answerer of the who form civilization

organizer of the pro-civilization activity

leader (possibly) of the civilizing forces

A universal rather than optional mission

Th.3 retains a primary focus on

elated political power as

the central arena and fulcrum

by which a free people determine

future and govern themselves

#1

18 DEC 1992

Exhibit 42

HAN 02104